THE OHIO

MEDICAL AND SURGICAL JOURNAL.

Vol. III. Columbus, July 1, 1851. No. VI.

PART FIRST.

ORIGINAL COMMUNICATIONS.

ART. I.—*On some points of the Pathology and Treatment of Typhoid Fever.* BY H. L. THRALL, M. D., *of Columbus, Ohio.*

The treatment of disease is in general successful, in proportion as the process is based upon accurate pathological views.

Our knowledge of the specific poison—the materies morbi of typhoid fever is confined to its effects upon the body.

These effects reach the muscular fibres of animal and organic life; the nervous fibres and centres, cerebro-spinal and sympathetic; the red and white corpuscles of the blood and lymph; the secreting cells, and those of which the solid tissues are composed.

The energy of innervation and muscular contraction is perverted and depressed, and as the disease progresses profoundly so. Although the pulse is accelerated in frequency, it is feeble. If in the febrile stage the frequency and force of the heart's action are increased, these are secondary effects, and are not referable to the direct action of the poison. During the stage of incubation, and the first stage of the disease itself, cardiac and vascular action are *depressed.* The changes due to the floating cells of the absorbent and sanguiferous systems, comprising the assimilating functions, suffer more profound depression and perversion, than even the nervous and muscular systems. Fibrine, one of the most important products of assimilation—the pabulum from which all cells grow, falls as the disease progresses more and more below the physiological mean, in quantity and plasticity. The tendency to caco-plastic and aplastic deposits induced by typhoid fever, attests the depression and perversion of the nutritive functions. This is to be referred, in part, to the

depressed and perverted vitality of nutritive cell growth, in part to the diminution in quantity and quality of fibrine.

A review of the catalogue of the *direct* effects of the materies morbi of typhoid fever, authorizes us to view it as a depressing, perverting poison.

The ravages of death among the older cells composing the solid tissues, and their removal by absorption, is evidenced in the unusual emaciation. Great waste of the solid nitrogenized tissues, is more decidedly characteristic of typhoid than of other idiopathic fevers.

Physiological, or healthy waste of the solid organism, is in direct proportion to functional activity. Thus active muscular exercise increases the quantity of urea and other nitrogenized components of the urine—the products of increased muscular waste. But in febrile disease, attended with depression and perversion of the vital forces, waste is proportioned to the depression and perversion, rather than to functional exercise. Each organ of the body is made up of a great number of cells, the walls of which adhere where in contact, or where there is some form of intercellular substance, generally areolar tissue, which is the medium of union. The sum of all the individual cells, with the intercellular substance and vessels, makes up the mass of an organ.

Each cell has a life, and vital principle, and term of life, distinct from every other cell; and distinct from the life, vital principle, and term of life of the whole body; the life of the body being a complex; the sum of the lives of all the cells composing the whole organism.

Expression is given to the special distinctness of the vital principle in each species, or kind of cell, in the products of its action. The vital endowment, force, or principle of the bile-secreting cell, differs from the urine-secreting cell, as greatly as the sensible, chemical, and physical properties of bile differ from urine. The materies morborum of idiopathic fevers have an all-pervading influence. They modify the life of each of the various kinds of cells in a specific manner. A faithful idea of idiopathic fever can only be presented to the mind, by portraying the departure from healthy action of each kind of cell composing the whole organism. To say that any organ or tissue—the nervous centres for instance, or the stomach, enjoys an aristocratic monopoly of life and vital principle, and hence becomes the special seat of idiopathic fevers, betrays as great misconception, as would the assertion that some wealthy individual of a

community had the vested monopoly of life and vital principle for each member of the community. In a healthy adult, the number of deaths of the older cells of an organ, is in equilibrio, with the number of births of young cells. Waste and supply—nutrition and insterstitial absorption—are equal. As large numbers of infirm old persons meet a premature death, under the depressing influence of a degree of cold which the younger members of the community withstand; so under the depressing, perverted influence of the typhoid materies morbi, the old infirm cells die in unusually large numbers. If we turn our attention to the condition of the secreting cells of the kidneys, in typhoid fever, we again find evidence of perversion and depression; the quantity of urea and other nitrogenized compounds, is far below the physiological mean. It must be evident that the products of increased waste of the tissues, are accumulating in the blood. Excretion by the liver is not increased, for it is unusual in this fever to meet with increased discharges of bile. Deficient excretion of the kidneys then, is not supplemented by the liver; and we could scarcely expect it; for nitrogen is the characteristic ingredient of urine, and carbon and hydrogen of bile. As waste of nitrogenized tissues is increased, and excretion by the kidneys of nitrogenized matter is diminished, the blood is loaded with poisonous irritating, effete compounds, which reach the capillaries of the nervous centres, of the muscular fibres, and of the secreting cells, to add to the depression and perversion of the original materies morbi. The red corpuscles and the white, of the blood and lymph, are floating in liquids, poisoned by retained excrementitious compounds. All the functions are perverted, irritated, or depressed, by the concliminated matters.

The fibrine of the blood is still farther lessened in quantity, and approaches to the aplastic state. Stupor, coma, and low delirium, manifest the depressed, perverted condition of the sensorial and cerebral centres. The tremulous tongue and limbs, the subsultus tendinum, and feeble pulse, indicate the increasing depression of the muscular systems.

The dusky redness of the cutaneous and mucous surfaces, announce defective aeration by the lungs and skin. The oozing blood from the mucous surfaces, the petechiæ and vibices of the skin, tell but too plainly the want of viscidity, and the dissolved state of the blood, and the want of firm resistance of the capillaries. All other febrile diseases, idiopathic and symptomatic, accompanied with great

depression of the vital forces, and active waste, are attended with the typhoid symptoms, due to poisonous contamination of the blood from excess of waste; but they are not attended with the specific symptoms caused by the typhoid materies morbi. The term typhoid is used in a generic, as well as in a specific sense. Specifically it is applied to an idiopathic febrile disease, caused by an aeriform poison specifically distinct from all other infectious or miasmatic poisons. Generically it is applied to a large number of asthenic, low, febrile conditions of the system, attended with increased waste and defective excretion.

"There seems little doubt," says Carpenter in his Human Pysiology, "that the general function of the glandulæ of the ileum and colon, is to eliminate from the blood those putrescent waste matters which would otherwise accumulate in it to a hurtful extent." This view of the office of the glands in the walls of the ileum and colon was first advanced by J. C. B. Williams.

There are so many pathological facts, which corroborate the eliminating functions of these glands, that we do not hesitate to receive Dr. Williams's views.

After the thorough operation of a cathartic, that effectually frees the intestinal canal of its contents, patients will have daily fæcal passages for ten days or two weeks, and take little or no food; but in the mean time the extremities and body are greatly emaciated. The loss of solid matter by the urine is insufficient to explain this extreme emaciation. Now there are no other organs by which the wasting tissues can gain access to the intestinal canal but the liver, pancreas, and intestinal glands. If this solid matter gained access by the liver, it would be largely colored by the bililary coloring matter, which is so far from being the case, that the liver may be in a torpid state; the pancreatic fluid, as is well known, contains but little solid matter. Further, the fœcal properties are first acquired by the contents of the intestines, where these glands are found. The glands in question are more numerous in the ileum and upper colon, than in the rectum and lower colon, and as the greater consistence of the contents of the lower tract calls for more lubrication by mucus, we infer that the glands in the ileum are not for the secretion of mucus. Irritation of the rectum and lower colon occasions mucous discharges. Irritation of the upper colon and ileum is connected with feculent diarrhœa. Irritation of the upper intestinal tract leads to bilious symptoms.

The wasting tissues undergo a variety of changes in the blood, before they are fitted for excretion, as urea, uric acid, creatine, creatinine, &c. Let this process of change be called the destructive assimilation. If we compare the chemical composition of the nitrogenized compounds in the urine, with that of the wasting tissues, we find that large quantities of carbon and hydrogen disappear during the destructive assimilation, as an essential preliminary to the excretion, of equivalent complementary urinary compounds.

Oxygen is the active chemical agent in separating this carbon and hydrogen, as carbonic acid and water. After the elimination of the carbonic acid and urinary compounds, the complementary parts of the original tissues, are to be found in the matters eliminated by the skin, and in the excrementitious parts of the bile. In health, when the products of waste, accumulate in the blood faster than by the process of destructive assimilation they are fitted for elimination by the kidneys, lungs, skin and liver, they are excreted by the intestinal glands, by a true process of secretion, as fæcal matter. A few days continuance of typhoid fever with increased waste and decreased urinary excretion, the accumulation of effete semi-putrescent matter in the blood, calls the intestinal excretory glands into unusual activity. This soon passes into inflammatory hyperæmia, and then to ulceration. A moderate diarrhœa, under the circumstances, is desirable; its violence, however, now due in part to exosmose from morpid cappillary congestion, connected with tympanitic distention, comes to be an additional element of danger.

The ulcerated and inflamed glands perform their depurating functions less perfectly, and transmit irritation to the various nervous centres, to add to the disturbance already present. Thus what was an effort of nature to eliminate the poisonous effete accumulations by the bowels, comes to be an additional source of danger.

In accordance with the above pathological views, the indications of treatment are—first, to expedite the metamorphoses of the effete products of the waste tissues in the blood, so as to admit of their elimination by the kidneys, skin, lungs and liver. Secondly, to excite these several emunctories so as to keep the accumulation in the blood, within such limits that a moderate depurating action of the bowels only is requisite. Thirdly, to allay irritation and the tendency to excessive intestinal secretion.

I am aware that a doubt may arise in many minds, whether we are acquainted with means to meet the first indication. "I am anx-

ious" says Dr. Golding Bird, "to announce to you a new fact; one which bids fair to be of great importance in the treatment of disease. It is that we possess remedies which remarkably increase metamorphoses of the effete matters in the blood, and thus enable us to produce at will the very depurative effects, which I have pointed out to you. "In taking a view of the so called diuretic agents it will become necessary to divide them into two classes: 1st. Those which simply increase the bulk or watery portion of the urine. 2nd. Those which increase the metamorphoses of the effete tissues in the blood; (destructive assimilations,) and act as depurating agents, by increasing largely the quantity of urea, uric acid, creatine, creatinine, uroxanthia, &c. To the first class belong all those agents which out of the body exert no chemical transformation in complex organic compounds; including all the vegetable diuretics—squill, copaiba, broom, juniper, guiaiac digitalis, &c.; they increase the discharge of water by the kidneys, but do not eliminate a larger amount of nitrogenized compounds. The second class include the alcalies, their carbonates, tartrates, citrates, acetates, &c. These not only increase the aqueous part of the urine, but they actually increase the metamorphosis of the tissues, by, in all probability, a direct chemical action on the elements of the exhausted and worn out tissues." (See Bird as quoted in Braithwaite's Retrospect, No. 18, page 72-76.)

Remidies possessed of the properties claimed by Dr. Bird for those in his second class of diuretics, will meet our first indication.

After the exhibition of two powders of calomel of three grains each, with an interval of three hours, followed by a gentle laxative of rhubarb or castor oil; we direct four to eight grains of Dover's powder, every six hours. Twice in the interval of the Dover's powder, eight to fifteen grains of bitartrate or citrate of potassa, with two to five grains of the nitrate. The object to be aimed at is to administer such doses of the salt containing the vegetable acid, as will not disturb the bowels. If the bowels are irritated, diminish the dose of the salines, and increase the dose of the Dover's powder. We occasionally add camphor to the Dover's powder; and if the state of the bowels require it, aqua camphoræ, hf. ounce, with a few drops of the tincture of opium. Hydrargyrum cum creta may be added to the Dover's powder, if the biliary secretion seems to require it.

I have not repeated the laxative during the course of the fever, unless the bowels were torpid. The Dover's powder and opiates allay the irritation of the bowels, and thus lessen the tendency to in-

flammation; they quiet nervous irritation, and excite cutaneous elimination; while the salines accelerate the metamorphoses of the accumulating waste compounds in the blood, and their elimination by the kidneys. An occasional small dose of hydrargyrum cum creta added to the Dover's powder, gives a moderate impulse to biliary elimination. This has been my treatment of typhoid fever since meeting with the views of Dr. Bird in 1849. If put in force before the occurrence of diarrhœa, there has been none, or it has been so moderate as to be controlled readily, by a small increase of the opiate. The cerebral affection, and muscular debility have been very moderate, subsultus tendinum scarcely appearing. There has been no hæmorrhage from the mucous membranes, no petechiæ or vibices, and very moderate bronchial affection. The emaciation has been much less than I had formerly been in the habit of witnessing. The course of the disease has been abridged by two weeks, and the convalescence has been more speedy. I have been surprised to find in several cases of two or three weeks continuance, my patients with some little appetite on nearly every day, although the early tinnitus aurium, deafness, slight tenderness on pressure in the right iliac region, tenderness and slight enlargement of the spleen, occasiona stupor and slight wandering of mind during the febrile exacerbations, and the occurrence of sudamina, at the expected period, convinced me that the cases were unquestionably genuine typhoid fever.

I might suppose that all my cases for the last eighteen months were unusually mild, independent of the treatment; and such may have been the case; but in my neighborhood, aggravated cases been of frequent occurrence, and a few severe cases have come under my care, from the Esculapian irregulars, in which all the more grave symptoms continued from four to six weeks. The treatment should be commenced before the blood is largely poisoned, and before the occurrence of diarrhœa, with inflammation of the intestinal glands. After these complications, I should not expect with any confidence, that sufficient doses of the salines would be tolerated by the bowels.

A few words as to the modus operandi of the alkaline salts of vegetable acids. When administered, the alkaline bases are found in the urine, as carbonates; the carbon and hydrogen of the vegetable acids, in the round of the circulation, combine chemically with inspired oxygen, to form carbonic acid and water.

Now this transformation is gradual; there being formed various intermediate compounds, between the original acids and their final breaking up into carbonic acid and water. During the whole process of transformation they act as ferments, and by catalysis, or contact-excitation; extending a chemical impulse to the effete nitrogenized compounds in the blood, expediting their metamorphoses into urea, uric acid, &c.; and finally the resulting carbonates of the alkaline bases excite moderately the renal secretion and depurating function. It is not improbable that the catalytic and fermenting influence of the transforming acids also decompose and eliminate the materies morbi of the disease. If this be a correct view of the modus operandi of these remedies, the carbonates of the alcalies, cannot be properly substituted for the more complex vegetable acids. Although they have a slight diuretic action, they are not in a state of chemical transformation while in transitu from the stomach to the kidneys, and consequently would exert no ferment influence, and perhaps less catalytic action to hasten transformation.

As mercury lessens the quantity and plasticity of fibrine, and accelerates waste and absorption of the living solids, I have, of late years, avoided its constitutional action, and used only occasional doses of the mild hydrargyrum cum creta.

At the time of meeting with Dr. Bird's paper, I had only bitartrate of potassa on hand and used it combined with small doses of the nitrate. I should expect the same good results from citrate and acetate of potassee, but cannot speak from experience. Let it be remembered by the reader, that we have not aimed at a full history symptomatology, or pathology, of typhoid fever, but only such points of its pathology as illustrate the proposed plan of treatment. The many valuable remedies adapted to the varied complications of protracted cases are described in our standard works.

ART. II.—*The Nature, Origin and Properties of Organized Bodies.* By FRANCIS CARTER, M. D., *Prof. of Physiology, &c., in Starling Medical College.*

[CONTINUED.]

Our last paper was devoted to the consideration of the action of the vital forces, exercised by the cell germ, in forming the cell wall and filling its cavity with various unorganized matters. We have

shown that, in the first instance, there is no other possible source from which the vital forces can emanate, and that subsequently when the wall is formed, there is no reason to suppose that possessed of any other than physical properties. This formation of cell wall and non-vitalized contents, constitutes the sum of the life of many varieties of those cells which contribute to the formation of the higher plants and animals, those namely, through the agency of which, their various functions are performed. Though forming the most important organs in the higher orders of living beings, these are really, comparatively simple, and very low—if not the lowest—forms of living beings, merely endowed with the power of separating from a fluid with which they are in relation, some of its constituents, and combining those materials or altering them so as to present new but still inert compounds within their cavities, while they are apparently unable to exercise those forces which result in the chemical combination of the so called elementary forms of matter, or to continue the species by the generation of germs. In living—in the performance of their function as respects the organ of which they form the essential part—the germs of such cells would seem to exercise only a class of powers, to which we have at least close analogies, in chemical forces emanating from the inorganic world — not identical with them however; while for the production of a living organism, we know of no adequate force, or combination of forces, other than, Firstly, the creative force, producing the determinate thing as a type, and Secondly, the generative force, producing successive individuals of that type or species. Such cells, though forming as we have said, the most important organs of the higher beings by their aggregation, must yet be regarded as immeasurably beneath the single independent cell, constituting by itself in the highest sense an individuality, which performs for itself all the functions necessary to its being, from the first combination of the elements to the final elaboration of an organizable material, and then perpetuates the species by the act of generation. From this point we shall find as we ascend the scale of living forms that, as the type increases in complexity, that is, as distinct aggregations of cells into organs are provided to perform the special functions constituting the life of the individual so formed, the cells forming those organs are endowed with the power of exercising those life forces only, which are necessary for the performance of their special office. There is, as it were, a division of labor and a special organization for each division, thus effecting in the aggregate

the production and exercise of all the vital forces incident to the type or species. Special provisions are made for the maintenance of these organs, by the generation of new germs, and further, a special organism is provided for the generation of germs, representing the whole aggregation of organs, to be subsequently developed into individuals of the species. In the higher plants and animals this arrangement results in the performance of a greater variety of function, associated with a corresponding perfection in the performance of them, thus constituting more highly endowed creatures, as creatures, while the several parts are of the simplest possible character, possessed, each, of the least possible amount of — or rather exercising the fewest possible — vital forces, and probably from that very cause — in their more stable and permanent vital parts, at least, possessed of a more enduring vitality and one less easily deranged by disturbing causes. The fungus of an hour, and the oak of 1000 years, among plants, the almost shapeless polype, whose every cell is instinct with all the vital powers of the individual, and the complexly organized man, among animals, may be taken as examples. We believe it will hold as a law that where the cells of a tissue multiply themselves — generate their kind — that fact will indicate, whether in plant or animal a low and ephemeral form of organization in the tissue so formed, whether it apply to the whole individual as in the fungus, or to a part only, as in cartilage. In all such cases the individual cell life is active and *complete*, but the life of the whole is proportionally short. 'Tis true cartilage may be a permanent structure, but having been once formed. it is only permanent by being inactive, its germs are possessed of vitality, but in a nearly dormant condition. If their vital forces continue to act, or become roused into action, either of two events occur — bony matter is deposited through their agency, or changes take place which end in the speedy exhaustion of vitality, and we have degeneration and death of the part — the so called *ulceration* of the tissue ; in either case the tissue is destroyed.

Of those forms of cells which do not generate their kind, we have nothing further to say at present. Our aim being to arrive at definite ideas as to the precise mode in which germs of new individuals are produced.

Upon this subject much light has been thrown by the results of patient and very varied investigation ; but while many facts have been thus established, it must be confessed that the series is by no

means complete, and while it remains so, any deduction arrived at by reasoning must be also incomplete, and looked upon rather as useful in aiding and guiding further research, than as being a full and authoritative expression of philosophic fact. Such reasoning is often useful, too, in guiding the physician, incidentally if not directly, to a reasonably scientific application of knowledge to the practice of his art.

If we investigate the phenomena attending the production of a new generation in the simplest, but in the vitality of its living structure the most complete, form of living being, the isolated and independent cell, we find that the colored fluid enclosed in the cell cavity, is at first apparently homogeneous—a perfect solution. Up to and at this stage, it is sufficiently obvious that the language made use of by physiologists, in speaking of the phenomena of cell-growth, is exceedingly erroneous. All, so far as we know, seem to regard the method as being inter-molecular throughout—*Vide* Carpenter, speaking of a *germ* "becoming" a *cell*, and accounting for it by "its peculiar property of drawing materials to itself from the elements around, and of incorporating these with its own substance." We have already adverted to the fact that the germ and wall are radically different; the latter being by no means an extension of the former, nor yet an expansion of it. We have no reason to suppose that the germ has been in any way altered by exerting its vital forces for the formation of this organ, any more than we have to infer such an alteration from the exercise of the forces necessary to form the chemical compound of which the material of the wall consists.

Analogous forces to these last, result in the preparation of the colored fluid adverted to, within the cavity—this fluid, it is equally apparent, is not part of the germ any more than it is of the wall which contains it—it has been prepared by the agency of the germ, for a certain purpose, and the life-forces of the germ must yet be brought into requisition to attain that purpose. We shall not say a germ does or may not grow, become more developed, more powerful, or in being developed attain new powers; we now only say it is not essentially altered, and the other constituents of the cell are only materials upon which, or by means of which the germ acts.

The colored fluid, thus elaborated by the action of the germ, is found to contain a substance which is organizable. This is precipitated from its solution in a finely granular condition. The granules are aggregated into molecules, and these molecules take the size and

form of germs. The precipitate, the organizable material is organized, and a new generation of germs is thus produced—sometimes at first attached to the cell wall, but soon observed floating freely in the fluid contained in the cavity of the cell. With the accomplishment of this new organization terminates the life and vitality of the original germ. The life-forces which originated and maintained the peculiar condition of the wall having ceased, ordinary chemical forces resume their uncontrolled sway. The new generation of germs is set free by the destruction of the wall, the material of which is restored to more simple and permanent forms.

There can be no reasonable doubt that the germ which was the originator of all the antecedents, also exerted the influences necessary to the last process of generation—it (or they, if, as is possible, the concurring agencies of two germs in this step is always necessary) has produced germs after its kind, but how?

The idea generally entertained of the manner of this process we believe is, that the new being is formed in physical, molecular, and organic connection, with the old; that it is organized as an integral part of the parent, and that, *in this manner*, it takes on the organization and attending properties of the parent. The same idea of generation is extended to the process wherever or however it obtains—whether the product be a germ of a highly organized and complex individual, or merely the germ of an integral part thereof. Now, from this idea of true generation, in any instance, we are forced totally to dissent.

We believe it to be the same process, essentially, wherever manifested, in either kingdom of animated nature, and to consist in—

1st. The formation and elaboration of a peculiar organizable material in a state of solution.

2nd. In a special organization of this, by means of a force or influence exerted by a germ or germs, whose vital forces are in a state of activity, in more or less strict relations with that fluid, which state of activity presupposes the influence of temperature, &c.—the vital stimuli. When these conditions obtain, the process of organization takes place by the deposit of the elaborated material, in a molecular or organic condition, identical with the essential *type* or *species* of the germ or germs whose vital forces influenced the formation, rather than with the individual condition of the parent. This formation may take place in *physical* connection with the parent germ, or if there be two, with one of them; but it is never, we conceive, in mole-

cular or organic connection with a previous organization. The new being, never forms part of the old, nor does the parent, or any portion of it, form part of the new generation; either organization is, we take it, complete in itself, and both may, and in some instances do, co-exist as separate, independent and differently endowed individuals, though always of the same species or created type.

This view of the subject, we consider of great practical as well as theoretical importance, as we hope to some extent to illustrate while offering a few reasons for entertaining it.

First. An individual germ of any species or type, is endowed with special properties in virtue of its special organization. One of these properties, common to all races, is a capacity in the individuals of each to display active vitality during a determined period. Now if the new germ had ever formed part of the parent and been identical with it, it could have possessed but the properties of that parent, individual and typical, and its division would have amounted to an independent extension of that parent, merely; at its severance, for instance, instead of having before it the lifetime of the race, it could only have the unexpired lifetime of the parent, whose properties it possessed in common, and thus the typical extent of life could only have a manifestation in a *created*, never a procreated, individual.

But supposing the individual to be composed of an entirely new organization formed by a process entire and perfect in itself, from new material, and deriving its properties from an organization not fashioned after the individual parent merely, but far more in accordance with a *created* type, we have the conditions which will eminently endow each successive generation with the typical properties, bringing each, as it were, in immediate relation with the creative force which established the race. This organization and these properties would be perfect and invariable, were it not for numberless disturbing and modifying agencies to which the being is exposed. Some proceeding from peculiarities which characterized the individual condition and properties of the parent, may thus modify the vital forces which determine the new organization, others may proceed from modifications in the organizable material, or from varying conditions in the force of the vital stimuli, &c.; but certain it is that, everywhere, as the disturbing influences are removed or weakened, the tendency is strong, in every new generation, to revert to the original, the created or typical condition, and this is aided by a special provision of sexes, to be hereafter noticed.

We may here remark, that in all times, a practical result of this tendency was recognized, though the means by which that result was attained, could not have been known. *The vis medicatrix naturæ*, or by whatever name different ages have designated this exposition of a great law, is nothing more, as we understand it, than an expression of the fact, (as applied to the individual cells which, by their aggregation, form our organs, and in living perform the various functions of the economy, or rather to the parent germs of them,) that though the rule holds that "like will produce like," yet the likeness in the product will be less to the induced peculiarities of the producing individual, than to the created type of the parent. Remove the disturbing agent, and the next generation is not, in the instances to which the rule applies, like the parent—diseased—or like a previous generation, performing its functions imperfectly—a reversion is made to the standard of the type, and nature cures by the operation of a general law. *The creative force which ordained the species is constant*, the force of circumstances in inducing varieties, is capricious, and may be modified and changed, or one such force may neutralize another. We take it that, on this simple but broad basis—viz. the use of means for the removal or modification of agencies which are incompatible with the perfect *typical* organization of the germs of the various organic cells—must the rational and scientific practice of the healing art, in all its branches, be founded; inasmuch as it is by those cells that the functions are performed; and, as they vary from their type, so must the functions be diseased.

We may illustrate this subject by referring to certain phenomena in the vegetable world. The bud, scion, or cutting of a fruit tree, though induced to grow upon other than the original roots, and removed, it may be, by the space of a continent from them, is yet as truly a part of the original as it ever was, its term of life the same; it dies, when the vital energy of the seedling from which it was severed—it may be by a thousand removes—is exhausted.

Every one must be familiar with the fact that many trees, &c., require age, say 10 or 60 years, to show fruit or flowers from the seed; but by means of buds or cuttings, the first growth of the independent plant may do both. It evidently carries with it the age of the original, and not the age only, but all other properties also, as the form, color, flavor of the fruit, or flower, the habit of growth, liability to disease, &c.—in a word, all the properties which constitute identity; the two, or ten thousand independent existences thus produced,

are one individual of a species, or type, after all—a molecular, organic sameness once subsisted, and never can be dissolved.

Not so the true representative of a generation—the seedling. No matter how old the tree from which the germ has been separated, the life-time of that germ is the life-time of the species; *all its properties* are the properties of the *race*, influenced, 'tis true, by the individual peculiarities of the parents, but only so, as by one of very many extraneous agencies. No more intimate connection ever subsisted here than physical contiguity, for the vital forces act at sensible distances—circumstances modify so as to afford individual peculiarities; and where the circumstances are persistent we have a *variety* established, but only while the circumstances do persist. The apple, cultivated for centuries through many generations, still shows the inherent, unalterable disposition to resume in each generation its original variety, its true type, the crab, and will do so, invariably, and at once, if the disturbing agencies of cultivation, &c., be withheld. The horse, dwarfed among the mountain wilds of Snowdon, or upon the barren crags of Shetland, will, with the warmer temperature and abundant food of a more congenial climate, resume his proud position. Why, but that the type is stable, a work of creation; and his organization, in its essential peculiarities, is derived directly from that source alone.

The creative power, in calling into existence a form of organization—a species—in providing the conditions for its continuance, *created*, in the act, all the individuals of that species. Among the multitude of those conditions, the influence of a germ or germs, representing the species of the individual to be formed, is but one. Some other considerations may be presented sustaining this view of the subject.

If a new generation of germs is produced, their organization being effected as parts of the parent, or in any way, in molecular or organic connection with it, what becomes of the parent? Does each new germ bear with it a part of the old, so that of the multitude sometimes produced, each individual is, in some sort, composed of two, of different generations? This seems absurd; and yet there is but one alternative while adopting the generally received idea, viz, that the old germ molecularly dies out, as it were, and so severs its presumed organic connection with its descendants. This is, to say the least, a gratuitous hypothesis, and quite devoid of the support which the analogy presented between the previous vital processes occurring in the cell—in which the germ remains intact—affords, in support of

the view of an independent act of organization. And what shall we say to those numerous cases in which a special germ-producing germ, or nucleus, continues to influence the production of successive generations, perhaps during the life-time of the creature of which it forms an integral part?

Again, in the last mentioned case, the germs produced differ widely in their properties from the parent germ. If one were a part of the other they could not so differ. We may refer here also to the production of animals dissimilar to the parent in every observable respect, for a time at least—as in some of the lower Radiata, &c., and indeed to the embrionic condition of all animals. A common solution is afforded to all such difficulties, by the fact that, however much the descendant may differ from the parent—whether during the whole term of its existence, as the various organic cells do from that which immediately, or those which more remotely influence their formation, or only vary during successive stages of development to the mature individual, as in the immature of all highly organized living things—in neither case is the difference *radical*, it is not complete. In the first, though the parent germ or nucleus of the pepatic cell-germ, for instance, does *not* secrete bile, as its descendant does, and *does* secrete germs, as its descendants do not, yet each hepatic cell-germ is, as its progenitor, true to the type or created race of the organism of which it forms a part. According to the species, it is perpetually human, bovine, equine, &c., as it is also perpetually hepatic, or germ-producing, as the case may be. The latter form of cell-germ was as truly created to *secrete* germs, as the former to secrete, first a cell wall, and then bile, and their production is always true to the type.

In the instance of immature individuals, there is also the same adhesion to a definite species. The tadpole, an immature being, though in appearance and properties widely different from a frog, *is*, nevertheless, a frog in embryo—the two specifically the same; the human embryo, through all its stages, is human still; the created type of organization is permanent, through successive transformations of development. Nothing short of a creative force could originate a species, whether through the agency of, or without regard to, the influence exerted by a living organism of another race. Thus, and thus only is it, that the organized world is saved from an inundation of new races, or what would amount to the same thing, a fusion of diverse species by promiscuous generation. The product in that case

would be a new creature—a new creation—and to no created thing has the exercise of creative force been delegated. Of the means which are employed to ensure this result—the permanent distinction of species—we shall have occasion to speak when investigating the varieties in the process of generation, which obtain among different organic formations.

(To be continued.)

ART. III.—*On the Cause of Labor.* By FRANCIS CARTER, M. D., *Prof. of Physiology &c., in Starling Medical College.*

The importance of correct and definite views of the nature of the functions performed by the several organs in health, with the causes which determine them, is justly appreciated as the foundation for pathological investigation. The necessity of this as a basis of scientific practice, it is unnecessary at this day to urge.

Few physiological questions have elicited more varied, and at the same time more unsatisfactory answers, than that relating to the cause which determines the period of parturition. With some it is "inexplicable," others will have it depending on some placental change, nervous periodicity, maturity of the ovum, &c., and some of the best modern authorities suppose it to depend upon some constitutional cause. (Carpenter.) This we cannot at all admit; and we think that a careful study of the phenomena, and a full appreciation of the properties of the organisms concerned, will lead to as satisfactory an explanation of this, as we are able to afford of any other function.

The uterus, in the healthy unimpregnated female, may be said to perform no function, (save menstruation?) nor has it any peculiarity of structure in that state which would enable it to perform any — it is, indeed, strictly embryonic. When brought under certain influences, however, it manifests the capacity for growth, and the development of a tissue endowed with vital properties. Non-striated muscular fibre is developed in the walls of the organ, until from the condition of a nearly solid and inert fibrous structure, it assumes all the characteristics of a hollow muscle. The first may be looked upon as the natural quiescent condition of the organ, the second as its state of organic life. This development may be excited to a certain extent by many causes, but most perfectly by the stimulus of conception and natural gestation.

Like all organic growth and development, wherever occurring, there is a period assigned to that of the uterus, a limit beyond which it cannot take place. This limitation in point of size, like the time requisite for its accomplishment, the shape which the living mass assumes, and the peculiar vital endowments resulting from its organization, is a law of its being — all these are properties of every organism, varying with each as the structure or purpose of each varies. A thousand circumstances may interfere with the proper development of those properties or may modify them; always to impair, however, and derange, never to extend or render more perfect than the type proper for each.

The peculiar structure, the muscular fibre of organic life which is thus developed, is, wherever found, endowed with the property of being most easily stimulated to the performance of its proper function, by means applied directly to itself, rather than through any part of the nervous system. Of these certainly one of the most effectual, as it in all cases is the most natural, is physical force, pressure upon the muscular fibre itself, by distention of the hollow organ, or otherwise.

And when one set of fibres are thus induced to act, there is an extension of a similar influence to the contiguous fibres, causing not unfrequently a similar exhibition of function.

We need only refer to the action of this structure in the heart, arteries, bladder, &c., to render this sufficiently evident. There are modifications of the functions, indeed, in each of these organs, as there are modifications of the tissue to suit the particular purpose, yet they are essentially alike. Physical force is the proper stimulant; and within limits, the energy of the contraction will be in proportion to the amount of force acting upon it, and afterwards to the resistance with which the contraction is met.

It remains to be seen what is the condition of the contents of this hollow muscle, and what relation they bear to it. It is well known and admitted that the process of growth and development of the uterus does not at all depend upon any distending force within the cavity, it is never stretched, never *full;* during this period its growth keeps even pace with the increase of its normal contents, so long as it grows at all; it merely *contains* the ovum — pressure would be inconsistent with the due performance of the functions proper to both.

Now we have seen that there is a natural limit to the development

of the containing organ, is there any limit to the increase of its contents? Yes, but it will require years to reach it; the limit of the child's development is only reached when manhood is attained; in the uterus there is progressive accelerated growth.

Here then we have all the circumstances which are essential, or at all necessary for the production of the phenomena and at a determinate time. The containing muscle quietly grows, enlarging its cavity to the utmost period consistent with the laws of its peculiar organism; its contents, as such, know no such limit, but continue to grow, though further room is denied them, thus causing pressure, an attempt at distention, which is the very agent best calculated to stimulate the action of the containing muscle. This we conceive it does, the peculiar contractions increasing in intensity with the resistance offered, from the first imperceptible painless contractions ensuing on complete development, to the energetic and powerful efforts usually necessary for the expulsion of its contents.

It will be at once apparent, if this view be correct, that its pathological relations are of no little importance, and in very briefly indicating some of them, we shall at the same time notice two objections, which might be urged against its correctness.

The essential conditions of uterine contraction, we suppose to be, 1st, development of its proper muscular structure; 2d, the action of a stimulant, which is always of one kind, viz: applied physical force. This stimulant may be applied in three very different ways, yet producing the same effect: 1st. From within the cavity. 2d. From without the organ. 3d. From causes acting in the structure itself. Each of these demand some attention, and one or other, we conceive, will explain nearly all the phenomena of uterine action.

First, of causes acting within the uterus. That resulting from the continued growth of the ovum after the uterus is fully developed, we have already spoken of; but like all other organisms, there may be an arrest of development in this at any time from various causes; or a part of the structure as the neck, &c., may be incapable of development from alterations of its structure; or, again, development of the organ may not be effected as *rapidly* as the development of the contained ovum.

In any of these cases, it is evident that pressure must result from within; contraction may ensue, and premature extrusion of the ovum follow.

Abnormal growths of various kinds, in the cavity of the uterus

give rise to similar phenomena from similar causes. The effect of pressure from within is well shown, where the hand is introduced in cases of hæmorrhage, in after pains from the pressure of a clot, &c. It must be remembered that when once roused to functional activity, action does not cease in such muscles, so long as there is any opposition to complete contraction, or until contractility is exhausted.

The bladder will tolerate a certain amount of fluid; when once acting, however, it expels the whole. Mobility seems to increase with use.

It will also be borne in mind, that as with the bladder, so with the uterus, distention may, under certain circumstances, occur to so great an extent as to paralize.

Many circumstances unconnected with utero-gestation may give rise to development of the proper active structure of the uterus, disease of an ovary, or of the uterus itself, dysmenorrhœa, extra uterine pregnancy, tumors in the abdominal or pelvic cavities, &c. Now, sooner or later, any of these causes are likely to give rise to pressure, to exert some force upon the organ, and nearly all from without.

So may certain displacements of the organ and accumulations in the rectum and colon. In any of these cases we may have contractions determined, and occasionally of great severity. Carpenter supposes the occurrence of contractions, in cases of extra-uterine pregnancy, conclusive as to the constitutional nature of their origin; it does not so appear to us. That the uterus does, to a certain extent, become developed in such cases, is made manifest by the contractions occurring; and as the cavity of the abdomen will not admit of the long continued growth of both uterus and ovum, it follows of course, that pressure must ensue and be followed by pains and contractions of the former.

Perhaps the most important view of this subject in its pathological relations, is that presented by the occurrence of forces acting within the structure of the organ itself; the principal of these will be found originating in variations of force and quantity in its circulation, this we conceive to be the fruitful cause of many distressing and painful sensations in nervous and excitable women.

In the undeveloped state of the organ, the uterine vessels are small, nutritive change is but little required by the nature of its tissue or in connection with function, and its relative situation suffices to

maintain its temperature. But with the commencement of gestation and its own organic development, a large and constantly increasing supply of blood is necessary, and we find its vessels developed in connection with its other tissues; not merely its own nutrient vessels, but others also, and far larger ones connected with the performance of its office, as the channel of supply to the placental circulation.

Now we have every reason to believe that, let the development of the uterine structure be determined by what source of stimulation soever, to a certain extent, the development of both classes of vessels keeps pace with it. If we take into consideration also, the fact, that generally this very large circulation is, from various causes, as the anatomical position of the organ, its various and intimate nervous connections, &c., constantly liable to great and sudden variations, and that those variations are but little susceptible of compensation, either by diversion to another channel, or by adequate increase of secretion, we will at once perceive that just the state of things actually exists, most likely to produce occasional and often very considerable physical effects upon the muscular fibre which everywhere exists, as it were, interwoven with the vessels. In fact, we every day see that slight inflammations of the os, &c., congestions, determinations at the menstrual period, the erect posture and certain nervous excitements, are each of them capable of producing painful contractions, in the gravid organ, or where it is abnormally developed from other causes.

We mentioned above, nervous excitement, as a not unfrequent cause of contraction, but wish to be understood that even this acts through the same agency generally, if not always.

We know that in other places the nervous system acts powerfully in determining the quantity of blood flowing through the part, the flush of the cheek is of this character, the rush of blood to and abundant secretion from the mammæ when the child cries. The same phenomena taking place in the salivary and lachrymal glands also, may be instanced. In all of these, as in the uterus, it is to the excitement of the emotional system of nerves, the phenomena are due, and the nervous woman with a more or less developed uterus, is unhappily as familiar with the abnormal and painful condition of things in the one case, as with the healthy function in the other.

It may be objected that this is too mechanical a view, that the contraction does not universally occur when the alleged cause is present. Granted; but what function does invariably take place merely from

the presence of the exciting cause; other conditions are just as necessary, and variations in those conditions will so operate as to vary or even suspend the function.

Muscle in different persons and under different circumstances, presents us with every degree of its vital property, contractility. It is sometimes much more easily excited to contract than at others, and both of those conditions may be manifest in only portions of a muscular organ. We may and often do have partial contractions from partial excitement, and also from a more excitable condition of some parts than others. This excessive mobility, probably arising from excessive nutrition, is often coupled with determination of blood. Be it remembered also, that in those cases, the blood *contains a large proportion of fibrine.*

When by accident or design, the membranes are ruptured before the time for natural parturition, it is well known that expulsive action is always induced, which generally terminates in the extrusion of the ovum.

Here the explanation of the phenomena is at hand. There was no pressure from within before the rupture, merely resistance to the pressure from without. This removed, however, it is evident that, 1st, the pressure of the contents of the abdomen and pelvis will be a disturbing cause; and, 2nd, the blood in the vessels of the uterine walls, will cause sufficient extension of them from the want of due support, to affect the muscular fibre.

The ordinary action of the abdominal, &c., muscles in labor does not merely serve to fix the uterus in situ, but serves also as a powerful stimulant to sustained and increased effort in the uterine fibres, as pressure or grasping with the hand will do.

It may be asked: Why does not pain come on at once when any of those circumstances occur? Pain is a mere incident to the peculiar muscular contractions, which *do often occur* (false ones) with it; and on the other hand, active contractions may take place without pain. *The first contractions, often lasting many hours, are without pain ordinarily,* painless contractions indeed, so called. Pain depends not upon the muscular contraction, but rather upon the condition of parts of the nervous system, which condition may, or may not, exist as a coincidence. *Contraction* does begin at once with more or less vigor.

When we speak of a definite period to development of the uterus, whether in point of size or time in which it occurs, we of course

must allow for the variations which will occur in these respects, in all organic structures.

There is a limit to the size of a human foot or nose, though they do vary from one another, and one person will attain maturity, perhaps years before another, and yet there is a period or age of puberty.

The same uterus will attain greater normal development in one pregnancy than in another; it must be remembered that at each development a different individual is produced.

ART. IV.—*On Malaria.* By J. R. BLACK, M. D., of Milwaukee, Wisconsin.

In a previous number of your Journal I gave some views on the subject of Malaria, which though new, I trust were not destitute of truth. It is a common observation, that truth is often found amidst the greatest errors; with the hope that this at least may prove apposite in the present case, I will subjoin a few additional remarks.

The doctrine essentially maintained in the article referred to, is the independence of intermittent, remittent, and other malarious affections, of vegetable or animal decomposition, and their dependence on diurnal ranges of temperature, whereby the human body is affected. In order to arrive at a correct conclusion, it is necessary to show that the diseases ordinarily referred to malaria, do occur under circumstances the most unfavorable to vegetable decomposition.

No country presents advantages to the student, equal to that of California. From March till November, is one uniform sunshine, while the remainder of the year makes up the rainy season. No particular or climatic disease prevails during the latter period, nor in the former until the month of August. About this time, the heat during the day is intense, while the nights are raw and chilly. Previously, the newly arrived Californian is surprised at the salubrity of the climate, and the extraordinary health of the miners under the greatest exposure. The most delicately constituted may sleep under the canopy of heaven unharmed. The blanket may be spread in the evening on the bare unprotected rocks, with feelings of dread and alarm, but in the morning the sleeper awakes surprised at being well refreshed and invigorated.

From August till the beginning of the rains, may be laid down as the unhealthy season of California. Intermittent, remittent fevers,

and dysentery, prevail to an unlimited extent. In their character they are generally mild, though singularly obstinate to treatment; oft-times all medicines are totally unavailing, and nothing short of a change of residence will effect a cure. Residents in the mountains ever since the first emigration to California, have found themselves under the necessity of removing to the valley to restore their health.

The diseases just named belong to that class universally acknowledged to be of malarious origin. But the question arises, from whence comes the malaria? Circumstances more unfavorable to its development could scarcely exist. As far as the eye can reach, the plains present the evidences of excessive drought. The vegetation of the rainy season is dead and dried, and nothing green can be seen, but the hardy live oak along the borders of some stream. Marshes and pools are almost unknown, and the tributaries and main branches of the rivers are swift and turbulent in their course. The total absence, therefore, of moisture, even the evening dew, prevents vegetable decomposition to any appreciable extent. In truth, the lives of numerous animals depend on the vegetation of the rainy season, preserving all the qualities requisite for their nourishment. Hence it must be inferred that the diseases prevalent in California, cannot be referred to a specific poison from decomposition. Nor can they be referred to animalculæ, for the circumstances supposed to favor their production are totally absent.

The most obvious cause of disease, must strike the observer in the coolness of the nights, compared with the days, during the sickly season. It is about this period that a chilling breeze sets in nightly from the mountains, causing the mountaineer to seek for a more efficient shelter. This coincidence of disease with a great diurnal range of temperature, confirms the hypothesis maintained in the former article. Let it however be remembered, that it is not merely necessary to have a change of temperature to produce the diseases attributed to malaria, but that it requires at the same time a high mean temperature. The more the body is stimulated by heat during the day, the more sensible and injurious is its sudden withdrawal. As we approach the tropics, intermittent and remittent diseases assume a more rapid and virulent character. This corresponds with the well known physiological fact that the higher the excitement, the greater the corresponding depression. The heat during the day is the stimulant — the absence during the night, the depression. The effect, derangement in the action of the skin, kidneys and liver.

Hence I have always found that a mercurial purgative, with some diaphoretic, was as essential to the cure as quinine.

ART. V. — *Cases from my Note Book.* By A. C. MOORE, M. D., *Locust Corner, Ohio.*

CASE I.—PUERPERAL CONVULSIONS.

March 21st, 1851, was called to Mrs. ——. Ætat 23; nervous temperament; in her 7th month; primipara. Found the patient on my arrival laboring in a severe spasm of the clonic character, which lasted some ten minutes, and was followed by a state of almost perfect coma. Breathing now full, deep and laborious; pupils dilated; tongue protruded and lacerated; mouth filled with frothy mucus; pulse slow, full and oppressed. On enquiry, obtained the following history of the case prior to my being called. On arising in the morning, she complained of considerable headache, giddiness, scintillations, dimness of vision, &c. These symptoms continued increasing throughout the day until 5 P. M., which time was marked by the accession of the first paroxysm. I arrived one hour after this, and when the patient was laboring in the fourth spasm.

A vaginal examination revealed the os uteri considerably dilated, soft, lax and moist, and the soft parts in a relaxed condition; but there seemed a total suspension of uterine action; nor had the patient, *prior* to becoming comatose, complained in any way, excepting *as above described*. Finding that either free internal examinations, or pressure on the abdominal tumor, sufficed to bring on a speedy return of the paroxysms, (at the same time that it did not increase uterine contraction,) I concluded that the remote cause existed in irritation, propagated from the uterus to the brain, and that any manual efforts at delivery (by increasing this) would be most unwise, and that the great reliance consisted in the lancet. I had the patient supported in the sitting posture, opened a vein in each arm, and abstracted 36 oz. of blood, without, however, any very perceptible effect resulting therefrom. The patient still continuing comatose, the feet were next placed in hot water (at a temperature so high that the hand could barely be dipped in it,) for the space of fifteen minutes; and on the head, which was elevated, a stream of cold water was constantly kept running. These means served to rouse the patient sufficient to enable her to swallow an active purge. Sinapisms were applied to the extremities, &c. About this time I

made a stethoscopic examination of the abdomen, which resulted in the conviction of the death of the fœtus. Both the placental "souffile" and the sound of the fœtal heart being wanting.

22d, 5 A. M. The spasms which seemed much less severe, and occurred at longer intervals through the night, again had increased in frequency and force; and continued to recur at tolerably regular intervals through the day until about 2 o'clock, P. M., at which time whilst making an examination, I detected slight uterine contractions. I now resorted to grasping pressure over the tumor, and such other means as were feasible to increase the parturient efforts, with the result of producing at one and the same time more violent *contractions and convulsions*, and I had the pleasure of at length finding labor progressing — the head occupying now the pelvic cavity. Spasm after spasm followed each other in rapid succession. In fifteen minutes longer the child was expelled, (of course dead, and from its appearance I should date *this occurrence* long prior to the accession of the paroxysms,) and was followed shortly after by the placenta. The feet were again placed in the hot bath. The cold continued to the head; the spasms gradually became less severe, and the intervals longer, until they entirely ceased, the patient falling into a deep, though somewhat natural sleep, from which she awakened in two hours, sensible, and recognising properly those by the bedside.

March 22d, morning. Patient rested but little through the night. At present there is great restlessness and severe headache. Continued the cataplasms — repeated the purge, (which acted but feebly) — darkened the apartment — ordered perfect rest and quietude both of mind and body — cold cloths to be kept to the head — spare diet, &c.

Evening same day. Patient rests easier, though still complaining of intense headache. Treatment continued nearly the same, with the addition of small and oft repeated doses of the Sed. Sol. of Opii.

24th. Patient better. Headache diminishing. From this date the patient slowly but steadily convalesced. The headache being the most *persistent* unfavorable symptom.

One circumstance in connection with this case struck me as being singular and remarkable, and I doubt whether a similar occurrence has ever been before noticed. I allude to a *perfect consciousness* on the part of the patient after the cessation of the convulsions, as to *what had occurred during her attack*. This, however, continued but the first three or four days after, and then all remembrance of

those incidents seemed *gradually* to disappear. It was not the ravings of a weakened, disordered mind, *by chance* describing what *had been*, for the patient was entirely rational, answering sensibly every question addressed her, calling every one (that approached her bedside) by their proper names, and betraying not by any wandering or incoherent speech any aberration of mind, and yet in this condition she would give as correct answers as to what occurred *between* the convulsions, as any one present could have done — seemed entirely sensible of having convulsions — described who held her when she was bled — (she was, when bled, in deep coma, and *apparently* perfectly insensible) — who was present, and, in short, any little "minutiae" that one of the *attendants* might have been expected to answer. As before stated, this *consciousness* lasted but three or four days, and all gradually then became a perfect *blank* — her mind remaining all the time (as it is at present) apparently undisturbed and healthy. I shall attempt no surmises as to the probable "whys and wherefores" of this unusual occurrence, but leave that to older and wiser heads.

Case II.—Menorrhagia.

March 13th. Called to Mrs. V. Ætat 43. Learned on my arrival at the house that the patient, after having walked a considerable distance, being heated and fatigued, was seized with profuse and alarming flooding some two hours prior to my arrival. The patient was lying in a bed literally soaked with blood, the discharge having ran through a double bed and bedding, and standing in a pool on the floor. Countenance exsanguined; pulse weak, small and compressible. Patient sensible, but making frequent ineffectual efforts at vomiting, and complains of vertigo, dimness of vision, &c. On making an examination, found the discharge still continuing profuse; every motion, however slight, being followed by a gush of the discharge. The finger detected the uterus small and unimpregnated; the mouth natural for the organ in this condition.

Ordered Acetum Plumbi, i. scr.; Pulv. Opii. x. grs.; to be made into 5 gr. pills, one of which was to be taken every two hours until three were taken. The head to be lowered, and cloths wrung out of cold spring water to be kept constantly applied to the pubic region, and changed as often as they became in the least heated. The discharge still continued until the patient went into a state of syncope, from which condition I was in no hurry to arouse her — carefully

watching her in the meantime, however. But as this condition seemed to exist longer than usual, it seemed advisable to change it. I therefore gave nature some slight assistance, when she promptly rallied, and with "many a sob and sigh," my fair patient again returned to consciousness; but, as I feared, this brought with it a return of the discharge. To control this, until I could bring the system under the use of the means necessary to effectually prevent its return, I made use of the Tampon. The pills and cold applications were continued, and on removing the vaginal plug about ten hours after its insertion, the discharge was found to be checked; one or two coagula escaped, and there was a slight discharge for some days, but this gradually became paler and paler, and lost the characteristics of blood, and finally ceased altogether. The after treatment consisted in rest, an appropriate diet, occasional doses of opium, and attention to the temperature. In one week from her attack, I allowed her to assume the upright posture, and take gentle exercise.

Her health had been on the decline for better than a year. The menstrual flow had decreased steadily in quantity during this time, and for two or three months had been irregular. She had been for some time under treatment for what her attendant had pronounced "inflammation of the neck of the bladder." But the whole train of symptoms I was inclined to view as dependants on the cessation of menstrual life.

Of all diseases or dangers to which the "fair daughters of Eve" are alone subject, none are more common, more alarming, or more fatal, than uterine hæmorrhage, let it arise from what cause it may, and perhaps none require more care and discrimination in their treatment; for what is beneficial in one condition, will be positively injurious in another. In cases like the above, I have generally followed a similar plan of treatment, and hitherto it has been successful. The combination of opium and acetate of lead, I view as one of the best we can possibly administer in those attacks. The cold applications I consider to be also of importance. They should not, however, be continued when the system becomes too much depressed. It has occurred to me once or twice to see (under those circumstances) their application evidently followed by injurious effects. But it is useless to particularize remedies when, after all, their application depends altogether on the *cause* which produces the attack, and the *condition* of the uterine organs; and many a fair patient's

fate rests on the discrimination of the practitioner as regards those two points.

ART. VI.—*Two Cases of Poisoning—one from the taking of nearly a drachm of morphine, the other from what was supposed to be laudanum. By* JNO. DAWSON, M. D., *Columbus, Ohio.*

CASE I.—A woman, 19 years of age, of lewd habits, and scrofulous temperament, procured a drachm of morphine and took it all, except four or five grains, in two doses, at a short interval between the doses. She gave as a reason for taking the morphine, that she was tired of living, and wished to die.

Symptoms.—In about half an hour after taking the medicine, some sleepiness and incoherence was observed. The tendency to sleep increased rapidly, and, in the course of a few hours, she was in a state of profound coma, apparently unconscious of what was going on around her. The breathing became stertorous, and there was a long interval between each act of respiration. We saw the case about 24 hours after the deed was committed, when we noted the following appearances:—Temperature of the surface natural; tongue dry; pulse smaller than natural, and about 120 to the minute; eyes injected; pupils very much contracted, and almost, if not entirely, insensible to light; occasionally slight voluntary motion. In thirty-six hours after the dose was taken, we noted the symptoms again; skin, tongue, eyes, voluntary movements, &c., exhibited no change. The pulse, however, and the respirations were accelerated, the former to 138, the latter to 36 to the minute. About forty-five hours afterwards, the symptoms were again noted, but presented no material change, except that the respirations were increased to 48 and the pulse to 148. She died at about the forty-eighth hour after taking the last dose.

Post-mortem.—Seventeen hours after death, the surface presented a bluish discoloration, most intense in the depending parts of the cadaver; a copper-colored eruption, in patches, on the arms and body, which, it was stated, had been present for some months previous to her illness.

Cranium.—The arteries, veins, and sinuses engorged with black fluid blood, that flowed freely when the vessels were cut; membranes injected; sella turcica reddish brown; corpus fimbriatum congested; an ounce and a half of fluid blood in the base of the skull; and about a drachm of colored serum in the ventricles.

Chest.—The lungs presented no abnormal appearance, except in the dependent portions, where they exhibited the usual post-mortem hyperæmia. Both ventricles of the heart contained black blood, the right being the fullest. There was also found in them about one drachm of fibrin.

Abdomen.—There appeared to be an unnatural fullness of the abdomen; liver healthy; gall-bladder full; the portion of colon and duodenum lying near the liver in the first stage of decomposition.

Stomach.—The external surface of a yellowish brown color; organ distended with gas; mucous membrane in a state of hyperemia for about one-third of its surface, most so about the cardiac orifice, with patches near the pyloric. The organ contained about two ounces of fluid of a yellowish brown color.

Effects of Remedies.—The morphine was taken on the 27th May, at, as near as could be ascertained, 6 o'clock, P. M. At 10 o'clock, P. M., the stomach pump was used by Drs. Hamilton and Gabriel. The patient however made strong resistance, and the contents of the stomach were, as a consequence, imperfectly evacuated. On the morning of the 28th, the patient being in a sinking condition, Dr. R. Thompson was called in consultation, and suggested the propriety of using electricity, chloroform, and brandy injections. This treatment was kept up during the most of the day of the 28th; and it was thought that under its influence the system rallied somewhat, the pulse, which had been imperceptible at the wrists, having become fuller, the breathing less laborious, and the evidences of returning sensibility more decided. On the evening of the 28th, the patient was washed off with cold water by the nurses, and was found, at 10 o'clock of the same evening, to be sinking. She continued to sink gradually, until about 4 o'clock on the evening of the 29th, when she died, having lived about forty-eight hours after taking the poison.

CASE II.—A man 49 years of age, a stone-mason by occupation, was found dead lying on his side on a "Lounge," on the morning of the 28th May. His wife, who was confined in child-bed, stated that he had repeatedly threatened to commit suicide, telling her at the time, that he had the article in the house with which to accomplish his purpose. On the night of the 27th, his wife occupying the same room, heard him breathing in a loud stertorous manner, but felt no uneasiness, until on calling him up on the morning of the 28th to go to market, he was found lying on his side, dead. In trying to get at

the cause of his death, a vial that had contained something like an ounce of *laudanum*, according to the testimony of his wife, was found emptied, and on the bureau near where the corpse lay, was a tea-cup containing, as was supposed, the dregs of a preparation of opium.

The man lay upon his side with his legs and arms flexed, as in the usual position for sleep, and was supposed to have lived about six hours after taking the poison.

Post-mortem.—The examination took place while the body was still warm. The whole exterior of the body and limbs exhibited a bluish aspect, most intense in the dependent parts. Although the body was still warm, yet the limbs were stiff and unyielding.

Head.—On opening the cranium the membranes were found congested; the arteries, veins, and sinuses filled with dark blood; and, in the base of the skull, there was about a gill of black blood, that flowed from the vessels cut in removing the brain.

Chest.—The parenchyma of the lungs presented, as far as we could observe, no departure from the natural state. When cut into, dark blood flowed freely from the vessels.

Abdomen.—The liver was healthy; small and large intestines natural, except uncommon blueness externally.

Stomach.—This organ contained near half a pint of yellowish brown fluid. The mucous membrane around the cardiac and pyloric orifices, was in a state of hyperæmia, most intense and extensive about the former.

REMARKS.—These two cases resembled each other in several respects; and in others, were somewhat different. The engorged condition of the vessels of the brain, the blue condition of the skin, and the hyperæmia of the mucous membrane of the stomach, were similar in both cases. They differed in the length of time which they survived after taking the poison. The girl, who had taken within a few grains of a drachm of morphine, lived about forty-eight hours; the man who took, as was supposed, something near an ounce of laudanum, died in about six hours afterwards.

ART. VII.—*On Mountain Fever.* By C. E. BOYLE, M. D., *Columbus, Ohio.*

The following short description of the above named disease may be somewhat interesting to your numerous readers, especially as it may be new to many of them, as it was to me, as I have never seen it described, and met it for the first time on my way to the Pacific coast, when crossing the Rocky Mountains. The description of a single case will be sufficient to enable any one to recognise the disease, when uncomplicated, as all the different cases which I saw presented the same symptoms, varying only in degree, but not in kind. I will also advert to the preceding and concomitant circumstances, together with the general course of treatment instituted, with its results; and then state the opinion I formed in reference to the cause and character of the disease, known by the name of Mountain Fever, Rocky Mountain Fever, Bull Fever, &c., to which a majority of persons are liable when traversing the region of country in the vicinity of the Rocky Mountains for the first time.

CASE.—On the morning of the day upon which we reached the South Pass, Mr. F. was suddenly affected with a very disagreeable sensation of vacuity (as he very properly described it) in the head, and a slight unsteadiness of gait, and loss of appetite. These symptoms continued three or four hours, and were then succeeded by an accession of violent fever, characterized by a full, hard, rapid pulse, furred tongue, flushed face, thirst, confined bowels, scanty, high-colored urine, very offensive in smell, intense pain in almost every part of the body, but more particularly distressing in the head, neck, and loins, with delirium, and great restlessness. These were the principal symptoms of the case, which was a medium one in violence. The treatment I instituted was a free evacuation of the bowels by means of calomel and castor oil, accompanied by an hourly administration of nauseating doses of ipecacuanha, combined with a small quantity of opium. After the operation of the cathartic, there was a decided diminution of the febrile symptoms. I then added the use of nitric ether to the ipecac and opium; and by these means entire relief from febrile symptoms was secured in four or five hours, indicated by a gentle diaphoresis, relief of pain, delirium, &c., &c. The patient recovered quite rapidly, so that in two or three days he exhibited no signs of having been ill. When the febrile disturbance subsided, I administered quinine in the ordinary antiperiodic doses, and the patient suffered no return of fever; but whether the use of

quinine was necessary or not, or whether the disease would have returned without its administration, I am unable to say.

Such was the course of this, the first case, which occurred in a man previously, and up to the time of the attack, in apparently good health, and who had no other sickness on the journey. The only variation I made in the plan of treatment of other cases, was in one instance to resort to venesection, to which I was impelled by the violence of the symptoms, and their threatening character; and the relief which this means afforded was quite prompt. Some idea of the amount of liability may be formed, from the fact that more than half of the company I was with were affected by the disease in a greater or less degree. All of these recovered quite rapidly under the free use of cathartics, diaphoretics, refrigerants, &c., &c.

The suddenness and violence of the attack, and the prompt and complete relief afforded by treatment, was a peculiarity which most surprised me; and I believe the disease, when uncomplicated, if properly treated, would never, in any instance, prove fatal, although some few whom I did not see did die of it.

The circumstances under which we had been previously placed were these: We were traveling at the rate of twenty-five or thirty miles per day, and had been gradually attaining a great altitude (between seven thousand and eight thousand feet), where the air was greatly attenuated; and our food consisted principally of fat bacon and sea-bread, and, owing to the cold and our fatigue, we were enabled to devour and digest large quantities of this oleaginous food.

I had observed, for several days previous to the occurrence of the first case, that the tenuity of the air was so great, and the quantity of oxygen in a given volume of atmosphere so small, that the ordinary respiratory efforts were not sufficient to supply the lungs with the requisite amount of that gas, which was diminished in proportion to the tenuity of the atmosphere; and it was with great difficulty that a person could walk and talk at the same time. There seemed to be an insufficiency in the air, and this produced a very unpleasant sensation of *want*, and impelled to frequent deep inspirations, even lying down at night, and otherwise perfectly at rest. The temperature was variable, but not uncomfortably cold: probably from 40° to 50° Fahr. during the day, and from 30° to 40° Fahr. during the night.

These circumstances prevailed the entire distance we traveled, from the time of the first occurrence of this disease, near South Pass,

until we reached the vicinity of Fort Hall, some four hundred miles; after which we did not suffer any more from it, and from which latter point the general altitude was much less than while the disease prevailed.

In view of the circumstances in which we were placed, the symptoms of the disease, and the effects of the treatment instituted, I was led to infer that the cause of the disease was to be attributed to the accumulation of an excess of undecarbonized matter in the circulatory system, which accumulation took place in consequence of the limited quantity of oxygen in the air being insufficient to decarbonize and eliminate these matters from the system through the lungs, and which could not be carried off by the liver, as its functional activity was lessened, or at least not increased, while the quantity of food was greater than the system demanded for the waste of the tissues and the supply of heat. The treatment was a depurative one; and the supply of food being diminished, the balance between supply and demand was readily regained, and health restored. In one case, I thought that I anticipated and prevented the full development of the disease, by the administration of an emetico-cathartic immediately upon the accession of the premonitory stage of the disease.

PART SECOND.

AMERICAN INTELLIGENCE.

ART. I. — *Case of Cynanche Parotidæa, with Metastasis to the Testicle, and Cerebral Complication. Convalescence in ten days.* By FRANCIS MINOT, M. D. (Read before the Boston Society for Medical Observation, Jan. 21st, 1850.)

Mr. A., a gentleman aged about fifty, tall, thin, with dark complexion, hair and eyes, of strongly marked nervous temperament, habitually dyspeptic and low spirited, frequently complaining of pain in the head, was more unwell than usual on the 9th of August, 1849, and, on the evening of the 10th, had swelling under the angle of the lower jaw on each side, with pain on motion of the jaw, and in swallowing. He was living at the time a few miles from the city, at a place where an epidemic of mumps was prevalent. The pain was quite severe, but the swelling moderate. He took no remedies, but

kept in doors until the 13th, when he came to town to attend to some important business, although it was raining, and the weather was damp and chilly. He was well wrapped up, and did not fatigue himself.

The same evening he called upon me to say that the swelling in the jaws had abated, and that he began to feel occasionally slight pain in the testicles. He was habitually costive, but the bowels had been freely opened by medicine. He was advised to take some mild laxative medicine, to go to bed, and to apply fomentations to the jaws, with support to the testicles.

The next morning (Aug. 14th,) the pain in the testicles had diminished, and that in the jaw was increased. He had had an uncomfortable night, and was very irritable and restless, complaining much of pain in the top of his head. The tongue was covered with a thin yellowish coat, and there had been no dejection. He repeated the medicine of the previous evening, but without effect; and towards night the pain in the head had increased considerably, and he had had alternations of chills and heat through the day. He was very restless and irritable, and the skin was very sensitive to the least touch. There was but little pain in the testicles. The pulse was 100, and quite full. There was considerable thirst, and no appetite. He was ordered four ounces of an infusion of senna and manna.

At 10 P. M., he had had no dejection, but passed much wind, which gave him great relief. He refused to take an enema. He had slept most of the time since six o'clock, and said he felt better, and that he had no pain in the testicles, except while standing up. Pulse 84; urine free.

Aug. 5th. He had slept heavily almost all night. At 3 A. M., he got another dose of senna and manna, which operated once. His condition was as follows: Drowsy; answers intelligently, but slowly, and sometimes a little incoherently; face flushed; skin hot and dry; tongue covered with a thin, moist, whitish coat; thirst moderate; bad taste in mouth; pulse 88, full, somewhat hard; urine free; no pain or swelling in angles of jaw; right testicle somewhat swollen, hard, and tender; left testicle natural. He refused to have leeches applied to the head. Thirty drops of Hoffmann's anodyne were ordered every hour and a half.

At 6 P. M., he was more drowsy and stupid; took no interest in what was going on, had some stertor, had slept heavily all day, and

had had one free dejection since morning. In other respects, he was the same as at the last visit.

Dr. J. Bigelow was called in consultation. The patient's feet were placed in warm water, sinapisms were applied to the feet and legs, fomentations to the abdomen and scrotum, and an evaporating lotion to the head. Ten grains each of calomel and compound extract of colocynth were administered.

Soon after this, he suddenly began to talk rapidly, and incoherently; became unreasonable, resisting the attentions of his attendants, and frequently expectorating small quantities of frothy saliva.

At 11 P. M., his condition remaining the same, about twelve ounces of blood were taken from the arm, the operation being performed with great difficulty, on account of the opposition of the patient. This was followed by no apparent change in the pulse or general symptoms. In the course of the night, he had a free dejection, getting up to the water closet, and returning to bed without assistance.

16*th*. During the night he had no sleep, but continued talking incessantly. There were no spasms or convulsions. Dr. Bigelow being out of town, Dr. J. Ware saw the patient in consultation. His condition was very much the same. He was talking incessantly and incoherently, frequently expectorating small quantities of frothy saliva; very irritable, answering tolerably well to questions, but wandering again immediately; the pupils were natural, the eyes generally closed; the hands were constantly applied, one to the head, the other to the scrotum, supporting the testicles; the right testicle was enlarged to about double the size of the other, hard and tender; the patient said it was not painful; the left testicle was natural; no pain or swelling in angles of jaw; skin hot and dry; face flushed; eye dull; tongue and mouth as on the 15th; much thirst; pulse 92, full, not hard. Twenty leeches were applied to the temples, notwithstanding much opposition on the part of the patient; croton oil was applied to the head, and he took a little gruel, and a cup of tea.

In the afternoon, Drs. Bigelow and Ware saw the patient in consultation. A scruple of calomel was given, and leeches were ordered to the scrotum, but the opposition of the patient was such that it was impossible to apply them.

Towards evening, he grew more quiet, and the delirium abated.

He sat up a few minutes, and said it gave great relief to his head. Afterwards, he lay quiet, occasionally dropping asleep, without stertor. Towards morning he slept for an hour quietly. During the night he rose several times and went to the water closet without assistance. His mind wandered occasionally, but he had no active delirium.

17*th.* Drs. Bigelow, Ware and Walker saw the patient. The general condition was much improved. Pulse 84, soft; skin cool, and less dry; tongue cleaner on edges; he asked for gruel. The pain in the head was better; the mind pretty clear, though weak; he burst into tears on seeing his friends. The testicle was somewhat less swollen, though still very tender. The scrotum was somewhat œdematous. The teeth were slightly tender, and there was a bad taste in the mouth.

During the day he sat up twice. In the evening the pulse was 76, and quite soft. The urine was free, but high colored and offensive. He was very quiet and rational. The eyes were painful, probably from the effect of the croton oil conveyed to them from the hair by the fingers.

From this time, Mr. A. steadily improved, and by the 20th was convalescent. The pain and swelling in the testicle gradually disappeared. The pain in the head remained for a long time, and for several days he continued so sensitive to noise that whereas before his illness he was slightly deaf, he could now hear the lowest voice with ease.

Although cerebral complication in cases of mumps is spoken of by all writers as generally fatal, the writer has been able to find but one recorded case in the books. Eberle (*Treatise on the Practice of Medicine*, vol. ii. p. 333) says: "I have known a case of this kind terminate fatally in less than an hour, under a paroxysm of violent convulsions." Perhaps the danger of the affection has been overrated. We may suppose that the sympathetic irritation caused by the metastasis of a specific and limited inflammation would be likely to cease when the latter had come to its natural termination; and, in fact, in this case the delirium ceased on the sixth day after the first appearance of the swelling of the parotid glands, being about the time when those glands would have subsided into their natural state, in the usual course of things. But observations are wanting on this point.

By a majority of writers, metastasis to the testicle in mumps is regarded as a favorable circumstance, as serving to divert the disease from the brain; yet, in this instance, the swelling of the testicle preceded the cerebral symptoms by about thirty-six or forty hours! and Watson (*Lectures and Principles on the Practice of Physic*, vol. i. p. 775) remarks: "Inflammation of the brain or its membranes has sometimes occurred on the disappearance of the *parotid* swelling; but it has much oftener supervened, I believe, upon the retrocession of the inflammation of the *testicle* or *mamma*." But in this case there was no *retrocession;* the testicle continued swollen and tender during the head symptoms, and for some time after.—*Phila. Med. Journal.*

ART. II. — *Cases of Asthma successfully treated by Nitric Acid.* By T. S. HOPKINS, M. D., *of Bethel, Glynn county, Georgia.*

The following five cases of asthma, cured by the use of nitric acid, have occurred in my practice since the summer of 1847. It is not my desire to attempt any explanation as to the modus operandi of this remedy in the above disease. Its beneficial effects were accidentally discovered, and, after a fair trial in five consecutive cases, with the most entire success, I am induced to bring it to the notice of the profession, trusting that in other hands than my own it may prove a potent agent for the relief of a disease which so often resists the best-directed treatment. Several of these cases were from twenty-five to thirty-five miles distant from my office. Most of them were not seen by me from the time of my first visit and prescription until a cure had been effected. I describe them as I found them at the time of my visit, and from the history given by parents and masters, which I think can be depended upon.

CASE I.—Emma, negro girl, aged five years, belonging to Mr. T. G., had been asthmatic *almost* from birth. Nightly paroxysms of dyspnœa, cough, &c., were represented as most distressing. During the day, she would be up and about the yard with the other children. At the time that I saw her, her respiration was somewhat embarrassed, with slight elevation of the shoulders during inspiration, and a very distinct mucous rale. Her appetite was impaired, and her countenance cheerless.

I ordered nitric acid, three drops, to be increased to five, three times daily, in a wineglassful of sugared water. A month elapsed before I again saw this patient, at which time every symptom of disease had disappeared. I prescribed for her in December, 1847, and up to date no symptom of asthma has returned.

CASE II.—I was called in November, 1848, to see W. S., aged about six years, son of a planter of Glynn county. I was informed that this boy had been a subject of asthma for four or five years; that no expense had been spared in seeking for relief in his case; and that all the efforts of the best physicians in the neighborhood in which he had resided, had been in vain. When I saw him, he had cough, slight dyspnœa, with mucous rale distinctly audible at the distance of several feet. By walking up and down the steps of the house, once or twice, the difficulty of breathing and cough would be much increased. He was very lively and cheerful, with a good appetite, and had had no fever for months. His father informed me that, upon the least *exposure* during the day, he would be attacked at night with the most fearful symptoms. Wheezing, panting, incessant cough, distressing dyspnœa, with impending suffocation, were the inevitable consequences (at night) of exposure during the day.

I ordered nitric acid, five drops, three times daily, in a wineglass of sugared water, with a strict avoidance of exposure.

In a fortnight, he had been so much relieved that his parents imagined him cured, and discontinued the acid. In a few days, he relapsed, and I was again sent for. I ordered the acid to be continued, as before, and in one month from the time of my first visit he was *cured.*

Up to date there has been no return of disease.

This boy's father died of phthisis pulmonalis. Several of his mother's family have died of the same disease; and all of *his* brothers and sisters, without an exception, have in early childhood been sufferers from enlargement of tonsils and ulcerated sore throat. He is now the picture of health.

CASE III.—A mulatto girl, belonging to Mr. W. D. T., aged four years. This was a case of congenital asthma.

The symptoms in this and the following case (aged about four years) were so similar to those of Case I., that I shall not describe them.

The treatment was nitric acid, three drops three times daily, in a wineglass of sugared water.

This case resisted the treatment rather longer than the other cases, but was *cured* in about six weeks.

In Case IV., the immediate effects of the acid were perceived in a few days; and in eight or ten days she was cured.

Case V.—I never saw. It was a negro girl belonging to Mr. C. of Camden county. She was seven years of age. Her master applied to me for a prescription, after giving some of the most prominent symptoms, which convinced me that the case was asthma, as he had declared it to be.

I prescribed five drops of nitric acid, three times daily.

I heard nothing more of this case for several months after I had prescribed, when I was informed by her master that she was well.

A sufficient time has elapsed, in all these cases, to convince me that they have been radically cured.

Should you deem the above remarks and cases worthy a place in your valuable journal, you will please to insert them. It is at least something *new* in the treatment of asthma.—*American Journal of the Medical Sciences.*

ART. III.—*Spina Bifida—Spontaneous Rupture of Sac.—Complete Cure.* BY W. H. NANCE, M. D., *of Vermont, Ill.*

The subject of the case in question was a young girl about thirteen years old; her mother informed me that, at birth, the tumour was about the size of the "end of the thumb," and could be easily pressed into the spinal canal. The tumor was situated at the juncture of the lumbar vertebræ with the sacrum, and, at the time I saw it, was as large or larger than a quart measure. It was of an oblong oval shape, had a neck an inch and a half or two inches in diameter, and made a prominence quite perceivable through all her clothing. The mother informed me that she had consulted (in the State of Ohio) several eminent physicians, when the child was small, and all advised her to have nothing done for it, as the child would not live long, and that anything that might be done would only hasten death. The child, however, continued to grow, was rather delicate, but had the proper use of all her limbs, the tumour increasing in size with her growth, until she was thirteen years old.

In February, 1848, almost all the family were afflicted with measles, and among the rest was the girl in qnestion; she had it pretty severely, and the eruption was profuse all over her body. About the time the eruption began to decline and desquamation came on, the pendent point of the tumour began to get sore, and turn of a darkish color, brought about, doubtless, by the exanthematous eruption acting on the part in its low state of vitality. The skin soon began to slough, and as soon as that took place, the water found its way through the textures beneath. and dribbled away continually, At this period, I was first called to the case, and found the tumour, as above stated, exquisitely tender to the touch, and constantly discharging a straw-colored water which percolated the remaining textures of the tumour, and came away in enormous quantities, so much so that her bedding had to be changed very often. Sheets, blankets, &c., that were laid about her, would soon have to be removed for new ones, being thoroughly wet with the water. When placed in an erect posture for a short time, the liquid would pass away in quick successive drops. It would be hard to compute the amount which passed off in the course of five or six days, but it was perhaps without parallel. I found the patient very weak; muscles shrunken; extremities cool and of a purplish cast; pulse quick, weak, and fluttering; countenance dull, and expressive of much suffering, with a partial loss of the use of the inferior extremities. These symptoms were dependent, doubtless, on the great loss of the fluids of the body, through a morbidly increased action of the serous membrane lining the spinal canal, and produced a condition somewhat analogous to that caused by hemorrhage, or like that from the excessive serous discharges in epidemic cholera. The symptoms strongly indicated speedy dissolution; I had but little expectation of saving the patient. I ordered her to take strong brandy in large doses, often repeated, until the skin became warmer and the pulse raised, unless it produced signs of intoxication; gave astringents also from time to time; had the extremities rubbed frequently, and wrapped in warm clothes, and applied a soothing poultice to the painful tumour. I knew that the tumour would burst soon, and as nature had commenced the operation, I concluded to support the system and let her do her work. On my next visit (the following day, I believe,) I found the sac empty, its walls all collapsed into

folds, hanging loosely down; in an effort to cough, it had given way and the contents had gushed out. General symptoms much as they were on the previous visit; discharge pretty considerable, perhaps a little abated; folds of sac very painful, look dark and inclined to gangrene at the inferior part, and emit a very offensive odour. Internal remedies to be continued was as much nourishing food as the patient will eat; bowels to be moved with castor oil if needed. Cloths were applied to the tumour wet with the liquid chloride of soda as strong as can be borne, to be repeated so as to keep the part entirely wet. On my next visit, I found my patient better, surface of body and limbs warmer and better color, discharge from tumour less in quantity; offensive smell much abated, the dead parts sloughed off, and the living taking on a more healthy action.

My patient after this continued to mend. The discharge daily grew less in quantity and thicker in consistence, until it finally became purulent, and after a time ceased altogether. The remains of the sac gradually contracted, and was, I suppose, absorbed in part, until a hard semi-cartilaginous lump is left but little larger than a hulled walnut, which is not at all in the way, and serves the valuable purpose of completely protecting the spinal canal in the part where the deficiency of bone first produced the disease.

It has now been more than two years since the occurrence. The girl has grown to be a woman in size, has the proper use of all her limbs without any weakness of the back, has excellent health, and a fine ruddy complexion, and bids as fair for a long and happy life as other young persons.—*American Journal of the Medical Sciences.*

ART. IV.—*Compression of the Abdominal Aorta, in a Corpulent Female, with Uterine Hemorrhage, after Delivery.* By IRA E. OATMAN, M. D., of Dundee, Ill.

The practice of compressing the aorta in uterine hemorrhage, I believe dates no further back than the time of Baudelocque. It appears strange that a discovery so simple, and yet so effectual as this, was not made in the days of Harvey. This practice has been adopted and recommended by Chailley and others. But so far as I have seen, it has only been used in persons of spare or moderately replete habit. The following case is submitted to show that it is practicable in corpulent persons, and that it affords means of safety in some cases, in no other way so easily obtained.

On the 19th of November, 1850, I was called early in the morning to see a lady twenty-six years of age, in labor with her first child. She was *corpulent*, low in stature, and of the lymphatic, sanguine temperament. The os uteri being little dilated, and the pains inconsiderable, I gave her an anodyne and left her at M. Returning at 4 P. M., I found the pains had been suspended for an hour, but they had returned slightly, and were more frequent. They continued to increase in strength slowly and tardily, the interval being about eight minutes. At 10½ P. M., she was delivered of a small male child. The uterus contracted slightly, and the placenta came away in ten or fifteen minutes, with an unusual quantity of blood. The uterus did not remain contracted, but became so flaccid that it could not be felt through the walls of the abdomen.

I depressed the head and shoulders of the patient and gave her ergot and plumb. acet., in doses as large as the stomach would bear. I continued the efforts through the parietes of the abdomen, to excite the uterus to contraction, which only occurred slightly, and in about eight minutes, as before delivery. I applied pounded ice over the abdomen.

The os uteri was still dilated, flaccid and occluded with coagula. The pulse was indistinct in the radial artery, the countenance was pale, anxious and ghastly, and the lips retracted. She had intense thirst and indiscribable debility, with occasional syncope. Fearing that she would die before I could remove the coagula, and use the hand for an internal stimulant to the womb; or use cold astringent injections, I directed my efforts to the abdominal aorta as a dernier resort, notwithstanding the excessive fatness of the patient.

After considerable ineffectual effort, I found by making fearfully hard pressure with the ends of the fingers, about two inches above the umbilicus, that the pulsations of the aorta could be controlled, this being the only eligible point for the operation. This gave instantaneous relief to all the urgent and fatal symptoms. I continued this pressure during three hours and ten minutes. The womb continued flaccid. Being compelled to change the hands often, sufficient blood would pass down to prevent the open mouths of the uterine vessels from being occluded, with dense coagula. Hence I thought it unsafe to discontinue the pressure sooner. Although the uterus was little contracted at the end of this time, the hemorrhage did not return. During this period the most perfect quiet was obser-

ved — the ice continued, opii, plumb. acet. and ergot was given occasionally; and she was often allowed rich chicken tea, which she took with great avidity.

The pulse slowly and gradually returned. By observing quiet and using nutritious drinks, with a little wine, she had no other untoward symptoms. After a few days I gave her small doses of sul. quinia, and ferri ferro-cyan., and acid nitric. She gradually and permanently recovered her usual health. The child did well.

I have had one case since, in which it was necessary to resort to compression of the aorta, in menorrhagia, after delivery. This also was with a first child, but the lady being of a spare habit, it required but little skill to practice it successfully.—*N. Western Med. & Sur. Jour.*

ART. V.—*Poisoning by Strychnine!—Use of Chloroform, as a Remedy.* By ORPHEUS EVERTS, M. D., of St. Charles, Ill.

Since the introduction of the vegetable alkaloids into medicine as remedial agents, from their resemblance in natural properties, and highly concentrated powers, frequent cases of poisoning occur from the accidental substitution of one for another; and more especially, as in the western country, every mother of a family assumes the responsibility of a physician to an extent at once presumptuous and alarming.

There are few families, indeed, in this section of county, who do not keep on hand a constant supply of quinine and morphine, and since strychnine has been extensively used for the cure of intermittents, that article is almost as recklessly dealt with by the common people, as those above mentioned.

Papers of medicine, likewise, put up by our lamentably ignorant and unqualified druggists, are seldom marked, and hence the slightest confusion, or a few months forgetfulness, renders the next child, unfortunately seized with an ague fit, liable to the extreme influence of an oblivious dose of morphine given for quinine, or the inexpressible torture of poisoning by strychnine.

The treatment in cases of poisoning from morphine, is generally understood and well established, differing in no essential point from that of opium, so long familiar to the profession. But, in cases of

over-doses of strychnine, we are thrown principally upon our own ingenuity, and the sources of suggestive philosophy.

The symptoms and course are prominent and well marked, and need never be confounded with the effects of morphine, as the cerebral organs suffer but little from the immediate impression, and the circulation less; at the same time, the spasms are of the most painful nature.

A case occurred a few days since in this village, in which I introduced the chloroform with the happiest effect, and hope that a record of it may not be valueless to the profession.

Mr. Couch aet 45, robust, of sanguine temperament, in previous full health, chilled in the evening, and supposed himself attacked with ague. His wife thought best to give him quinine; thought they had some in the house; found a paper and administered an ordinary dose. In a short time, alarming symptoms occurring, Dr. Crawford was called in. The doctor, on examination of the powder, pronounced it morphine, and commenced treatment. Antimony ipicac. and strong coffee were given. The symptoms increased; another physician was called, who recommended blood-letting; it was accordingly done. Symptoms becoming still more urgent, I was called. Found the head clear, circulation undisturbed, but an exalted condition of the functions of the spinal cord. The slightest touch of the skin, a drop of water, or a breath of air, producing violent and uncontrollable muscular contraction, attended with excruciating pain. There was inability to move or be moved, on account of this powerful eccentric influence. There was no nausea, though 20 grains of antimony, in combination with ipecac. had been administered, and no pain during interim of spasm. Satisfied, from the symptoms, of the presence of strychnine, I tested the remaining powder, and found it to be an adulterated specimen of the article, and supposed him to have taken equal to 3 grs. of a good article, perhaps not quite so much.

The intensity of pain suggested to my mind the use of chloroform, though doubtful of its influence. Dr. C. consented, and we commenced its use. After a few inspirations, we could touch the patient without exciting the spasm, and in five minutes he vomited freely. The first impression of the cloroform subsiding, all the symptoms returned, but yielded as quietly to its use again. We continued it in q. s. to control spasm for two hours, when I was called to treat an injury in town, and left the case with Dr. C., with the understanding

that the remedy should be continued as long as the symptoms demanded, or until it should fail to control them. After I left, the doctor withdrew the remedy, and administered a powder of some kind, perhaps morphine, but the spasm returned with such urgency that the patient was clamorous for the chloroform, and compelled a return to its use. The effect was precisely as before; it was now continued for three hours more, when the reflex action subsided almost entirely, and with the exception of soreness of the muscles, paralysis of the bladder from the strychnine, and the efforts of the antimony on the bowels, the patient was well.

That the chloroform was a happy and efficacious remedy in the case, there can be no doubt. That it would have prevented death in case a large dose had been taken, is by no means certain. But the matter can be tested, and I would suggest to some young men whose feelings and opportunities will allow, to make some experiments on animals, with a view of ascertaining to what extent chloroform will control that condition of the spinal cord induced by the nux vomica and its salts, and which so often terminates in the death of the animal. Chloroform acts upon the sensorium as well as the spinal axis. Strychnine is supposed to act entirely upon the spinal cord, or nearly so. The influence of chloroform upon the sensorium is to produce insensibility. What is its effect upon the cord? It is said, I believe, to have controlled spasm in cholera. It did control both pain and spasm in this case, and the control of spasm need not be by insensibility to pain, as the function of the cord in exciting muscular motion, is independent of the cerebrum, as has been abundantly exhibited.

In the case of Walker, previously reported in this Journal, spasmodic action always occurs in the lower extremities from the slightest eccentric influence, precisely as in the case of poisoning from strychnine, as observed in the case of Wm. Couch, and yet no sensation exists. Again, if chloroform renders the spinal cord insensible to the impression of strychnine, as it seems to have done in the case above, is it not an antidote, seeing that the force of the strychnine is spent upon the organ, and through it produces death? To future observers we submit the decision of this question.—*West. Med. Chirurg. Jour.*

ART. VI.—*Mechanical Obstruction of the Intestinal Canal, produced by Worms.* By L. S. JOYNES, M. D., Accomack C. H., Va.

The following example of an unusual effect of worms in the alimentary canal, has appeared to me worthy of being recorded, both for its intrinsic interest and on account of its bearing on an unsettled question in pathology, which merits the attention of practical men.

No little difference of opinion has long prevailed among medical authors and practitioners, with regard to the degree of importance to be assigned to the presence of entozoa as a cause of disease. While one party has attributed to their local and sympathetic irritation an almost endless catalogue of disorders, another has maintained that except in rare cases, they are quite harmless: indeed, some have gone so far as to ascribe to them a positively beneficial agency, as *scavengers* of the alimentary canal. Some apology may be found for this under estimate of the pathological consequence of worms, in the actual infrequency of any serious effects which can be *unequivocally* ascribed to their presence, and in the absurd abuse of vermifuges, arising from the manifest exaggeration of the opinions entertained on this subject by the public and a portion of the profession. It is, indeed, somewhat astonishing, considering what we hear and read of the ravages of these intruders on the human organism, how long a physician may practice, and successfully, too, in cases popularly attributed to worms, without feeling once called upon to prescribe a dose of anthelmintic medicine. But a case will now and then occur, in which some abdominal disorder, or some nervous derangement, is so plainly dependant on the presence of worms, that scepticism is compelled to give way, and pink root, wormseed and turpentine are appealed to, of necessity.

Among the local effects ascribed to these parasites, some authors allude, in terms of doubt, to the possibility of their occasioning, by their agglomeration, mechanical obstruction of the intestines. Dr. Joy, of Dublin, in his very copious and learned article on the subject, in the *Cyclopedia of Practical Medicine*, remarks on this subject, "Whether they have ever, from their numbers being very great, caused obstruction, and consequent inflammation and gangrene, is doubtful." And he quotes Rudolphi as expressing the opinion that "They can never produce absolute obstruction, as

there will always be room for the passage of chyle and fæces. Their agglomeration, occasionally detected in the human intestines along with ileus, as in a case mentioned by Rahn, is probably the effect, and not the cause of obstruction."

Grisolle, in his *Pathologie Interne*, after alluding to the possibility of a mass of worms causing the incarceration, and perhaps the strangulation of a *hernia*, goes on to say, "It has been in like manner pretended that these masses of lumbrici might interrupt the course of the fecal matters in a free portion of intestine, and produce all the symptoms of ileus; but this has not yet been demonstrated by any authentic fact. We may, however, conceive the possibility of such a thing. Thus, in a case reported by M. Bretonneau, a mass of worms as large as the fist distended the intestine," &c. Though Grisolle does not so state in express terms, I infer from the context that this convoluted mass of worms was only discovered after death.

These two are the only authors out of a dozen or so that I have consulted, that make any distinct allusion to the point under consideration.

The following case, which occurred under my observation very recently, although it does not offer an example of a complete and *insuperable* obstruction of the intestinal tube, yet goes far to justify the admission made by the author last cited, as to the possibility of such an occurrence.

On the 6th of March last, Mr. J. B. brought to my office a little negro boy, aged about seven years, who appeared to be suffering severely from pains, similar to those of colic, for which I was informed no relief could be procured. Mr. B. stated that about a week before, the boy previously in his usual health had complained of colicky pains of the same character, but less severe, which were relieved by the aromatic stimulants commonly resorted to in such cases in domestic practice, and a case of castor oil. No return of pain or other symptom of disease occurred until the day before that on which he was brought to my office. Then the colic returned with increased severity, and experienced no alleviation from a repetition of the remedies prescribed in the first instance. Although castor oil and an enema were administered, it was found impossible to move the bowels. The boy had called the attention of those around him to a "hard lump" in the lower part of his abdomen,

which appeared to be the starting point and centre of the pains which he suffered. I was farther informed that he had vomited after taking some medicine, and had thus rejected two lumbricoid worms.

On examining the patient, I found him with a calm pulse, a coated tongue, and complaining only of pain in the abdomen, which recurred in frequent paroxysms of considerable severity, and was evidently of the nature of colic. The abdomen was very tumid and tense, but free from tenderness, except immediately in the region of the tumor, where the sensibility to pressure was very decided. This tumor, which was evident enough to the touch, felt at first very much like the edge of some solid growth springing from one of the viscera, or from the posterior wall of the abdomen; but it was soon perceived to be moveable, and free from attachment to any more deeply seated solid mass. It was elongated and cylindroid in shape, and extended from near the left side of the brim of the lesser pelvis below, obliquely upwards and to the right, and terminated at a point an inch or two to the right of the umbilicus, and on a level with it. It was not quite straight in its direction, but presented one or more slight curves. Its total length I should estimate, (having made no measurement at the time,) at six or seven inches. Its thickness below was apparently about an inch; at the upper part it gradually diminished in size, and at its termination in this direction, was not more than half an inch thick. At some points of its surface, little irregularities could be felt through the thin abdominal wall; one of these, more distinct than the rest, imparted to the finger just such a sensation as might be produced by contact with the round, slender body of a worm. This circumstance, taken in connection with the other characters of the tumor, and the fact that the boy had vomited up two worms the day before, left little doubt that this tumor, the cause of the constipation and colic, was in reality a convoluted mass of lumbrici, occupying a part of the small intestine. I should add, that the patient stated to me that the tumor had changed its position somewhat since he first discovered it.

My prescription was in accordance with the view just expressed. I gave the boy immediately a dose of calomel and jalap, of each 5 grains, with 5 drops of oil of chenopodium, and directed that he should take 2 ounces of an infusion of spigelia and senna, with the addition of sulphate of magnesia every two hours, until the

bowels should be thoroughly evacuated. The operation of the medicine was also to be promoted by the use of enemata, largely impregnated with salt.

Notwithstanding the employment of these means, no action of the bowels was produced until the next morning; (the first dose of the medicine was given at noon.) The greater part of the infusion *was vomited.* When at length the bowels gave way, forty-six large lumbrici were discharged, all convoluted (according to the account given me,) in one mass. The pains were at once relieved, and the tumor and the abdominal tension had disappeared.

Here it will be seen, that althongh the intestinal obstruction was not insuperable, it was apparently complete, so long as it continued; and it would not have required a much greater degree of obstruction to give rise to all the symptoms of ileus. I apprehend that so distinct a tumor of this character is rarely met with. —*Stethoscope & Virginia Gaz.*

ART. VII.—"*On the treatment of Hysterical Fits by Tartarized Antimony.*" By J. LOCHART CLARKE, ESQ., Surgeon, Pimlico.

The length and severity of many of the paroxyms of hysteria, and the state of exhaustion in which they leave the patient, as well as the anxiety and alarm in the minds of her friends, render the successful treatment of these distressing cases a matter of considerable importance. Every medical man has too often witnessed the complete failure of stimulants, antispasmodics, and the other means usually employed on these occasions. Some time since, on seeing a case of great severity which had lasted nearly five hours, it occurred to me that the frightful spasms and contortions might be relieved by the administration of tartarized antimony. I accordingly ordered half a grain of this medicine to be taken every ten minutes till sickness ensued. The patient vomited a large quantity of undigested food and acid fluid, when the paroxyms (which abated as soon as nausea commenced) at once ceased, and complete consciousness returned. Since the occurrence of this case, I have adopted the same kind of treatment in several others, with uniform success; but I now find it better to administer a full emetic at once, instead of waiting for the slow operation of small repeated doses. I have also found this treatment very serviceable in many of the convulsions of children."

I have read the above paragraph, in the London Lancet of the 25th of January, [April No. of the American Edition,] with much satisfaction, and deem it well worthy of being reproduced in the Northern Lancet. It confirms a practice I have pursued during many years, which I have found to be effectual far beyond the old routine practice, and perfectly safe.

Shortly after my arrival in this city, I was requested to see a strong plethoric girl, 18 years of age, who had been laboring under hysteria for thirty-six hours, and to whom it had been impossible to administer any medicine. Rubefacients and counter-irritation of every degree and kind, with abundance of pungent odors to the nose, had been amply put in requisition, and the jaws being too strongly closed to admit of introducing anything into the mouth, as a last resource it was seriously proposed to "knock out a couple of teeth?" The patient was quite unconscious, face flushed, pulse very quick, and the slightest touch seemed to vibrate through the whole body, and severe convulsions would take place every hour. I bent up the end of a metal spoon so as to make a spout half an inch long, mixed xx grains of Ipecacuanha in a small quantity of water, and poured it into the nostril; immediately efforts at deglutition were manifested, and the liquid made its way into the stomach. In a few minutes the pulse bebecame slower, the face began to grow paler, then a copious perspiration broke out, and in less than ten minutes nausea was apparent, the features relaxed, the jaws fell, and copious vomiting followed; a considerable quantity of half-digested food, of an offensive and acid smell was ejected, and from that moment the convulsions ceased, consciousness returned, and next day all was right again, save with the usual bruised or sore state of the body.

In many similar cases I have pursued the same course, and with invariable success. Where medicine cannot be introduced by the mouth, either through the obstinacy of a refractory patient, or from spasmodic action of pharynx, or from the closure of the jaws, recourse should be had to the the air passages, when the object sought (the administration of medicines) will be almost invariably attained, at least, I have never failed in the attempt.

In the convulsions of children which justly cause so much alarm, and which generally originate from over-eating, or the presence of some crude indigestible substance in the stomach, and where it is im-

possible to administer any thing by the mouth, I have constantly succeeded in inducing speedy vomiting by the means above stated. In far older subjects, where a state of asphixia is produced by spirituous liquors, or by any cause suspending animation, and the patient lies in a most desperate situation, I have caused a prompt evacuation of the stomach by giving large doses of ipecacuanha through the nose, and immediately after have applied ammonia to the inner part of the lining membrane, which in a moment causes a heavy inspiration, sneezing follows, the nervous system being thus excited, is readily influenced by the ipecacuanha, and copious vomiting results. Except the person is in *articulo mortis*, some relief, if not complete resuscitation, is soon apparent.

It is meet that I should state, not in a single instance did any injury, or indeed, inconvenience arise from the practice; nor can I see how any could occur, as the passage is more direct and free from the nose to the pharynx, than it is by the mouth. But we can readily believe, from analogy, that considerable subsequent irritation and inflammation of the mucous membrane of the nose might ensue, if a strong solution of tartar emetic was used; but with the ipecacuanha, nothing of the kind is experienced. But exclusive of the apprehension of such irritation, etc., ipecacuanha is greatly to be preferred to the other, as it induces nausea much sooner, an object of great importance where death is impending; the efforts to vomit, though quite efficient, are less violent, the effects soon over, and the patient is not tormented by the repeated and distressing efforts to vomit, which so generally continue under the antimonial, even after the object for which it was administered, had been secured.

On some future occasion, I may communicate, through the *Northern Lancet*, the views I entertain of ipecacuanha, as a remedial agent; for the present, I will only say I take this valuable addition to our curative means to have been every way worthy of the encomiums bestowed upon it, on its introduction to European practice, now near two centuries and a half.—*Northern Lancet.*

PART THIRD.

FOREIGN INTELLIGENCE.

Art. I.—*Chloroform in Puerperal Convulsions.*

Dr. Keith gives the following particulars of a case of puerperal convulsions treated by chloroform. A lady, about the end of the seventh month of her first pregnancy, was suddenly seized with a convulsive fit, after suffering more or less for some days from headache, and slight feverish symptoms. The first fit occurred three hours before Dr. K. saw her, and in the interval she had three others. She had been bled, and the bowels had been freely opened. The fits ceased for a time, but after four hours they again recurred, and four followed each other in the course of less than an hour without any return to sensibility during the intervals. The bleeding was repeated very copiously, but seemed to have no effect in stopping the fits, or even in rendering them more moderate. Just as the fourth fit was coming on, the chloroform was administered. It had an immediate effect in restraining the convulsive efforts, and she soon became perfectly quiet. Dr. K. had ascertained, on first seeing the patient, that the os uteri was quite shut, and there had been no sign of labor coming on up to this period. Now, however, from the motions and expression of countenance, while she was still under thv chloroform, he was led again to examine as to the state of the uterus, and found that regular contractions had come on. The action of the chloroform was kept up, the labor went on steadily, and in six hours she was delivered of a still-born fœtus, without any recurrence of the convulsions. She slept for nearly an hour after the termination of the labor, when she awoke in a confused state, but perfectly rational, and almost free from headache. She made a most favorable recovery; indeed she had not a single bad symptom from the time that the chloroform was administered. The urine was highly albuminous, becoming almost solid on exposure to heat. The coagulability gradually went off, and after a fortnight there was scarcely a trace of it.—*Monthly Journ. of Med.* Aug. 1850.

Art. II.—*Laryngotomy and Tracheotomy.*

The question whether the operation of laryngotomy or that of tracheotomy should be performed for the relief of asphyxia, resulting from obstruction of the larynx, whether that disease be acute, or consecutive to a chronic affection of the organ of voice, is of very considerable importance to the practical surgeon, and has been most satisfactorily answered in favor of laryngotomy in a very interesting

paper published by Mr. P. Hewett in the *London Journal of Medicine* for February, 1849. In this communication, Mr. Hewett states that, in all cases of acute inflammation of the larynx in adults, and in those cases that occur in children from swallowing boiling water or other irritating fluids, the obstruction is seated *above* the inferior vocal chords; the mucous membranes covering them, or that below them, not being in the slightest degree thickened; and that consequently, as laryngotomy is a much simpler and safer operation than tracheotomy, it ought to be preferred in these cases.

John Erichson, Esq., states that he has been led to a similar conclusion in favor of laryngotomy by an inquiry into this subject, on which he entered some time since, and in the course of which he examined various recent specimens of inflamed and obstructed larynx, and those preparations of disease of this organ that are preserved in several of the pathological collections in London, without being able to meet with one in which an opening in the crico thyroid membrane would not have relieved the asphyxia equally as well as one in the trachea. This examination determined him in future to have recourse to laryngotomy rather than to tracheotomy in acute obstructions of the glottis, whether primary or supervening in chronic ulceration or disease of the part. This determination was strengthened by the result of the post-mortem examination of two cases in which he had performed tracheotomy — the one, of old syphilitic disease of the larynx, followed by acute œdema; the other, of erysipelas of the glottis, in both of which the obstruction was found to be situated above the inferior vocal chords.

ART. III.—*Spurious Pregnancy followed by Spurious Parturition.*

Dr. KEILLER communicated to the Edinburgh Obstetrical Society the particulars of a case in which the symptoms of spurious pregnancy, and subsequently those of spurious parturition, existed to such a remarkable degree as to induce the patient and her friends not only to prepare for the expected accouchement, but, when the supposed full time arrived, to believe in the actual commencement and continuance of a very painful labor, which ultimately became so protracted as to demand, according to the opinion of the attending accoucheur, the immediate and unavoidable performance of the *Cæsarian section!*

Dr. K., having been requested to visit the case for the purpose of satisfying the friends of the patient as to the propriety of having recourse to such an extreme mode of accomplishing the delivery as that which had been seriously proposed to them by the individual in attendance, was astonished to find, on making an examination, without any misgivings as to the parturient condition of the patient, that all the supposed symptoms of pregnancy and of parturition had been, and were still, *entirely spurious*, the uterus being evidently unimpregnated!

This startling opinion was anything but credited at the time by the females present, who altogether ridiculed the idea of the case not being one of "*real labor*," as the motions of the child had long been not only distinctly felt, but even seen "through the walls of the much distended abdomen," the patient herself insisting that the child's movements were so violent that she felt "as if it would leap through her side!"

The result of the case, however, sufficiently proved that her painful attempts at delivery could not possibly have been rendered less futile by the *Cæsarian section*, or any other *obstetrical* aid, as *pregnancy never had existed!*

The patient remained for a considerable time afterwards under the immediate care of Dr. Keiller, who stated that he considered the entire group of anomalous symptoms (which she presented in a very singular degree, and which he purposes recording) in a great measure referable to hysteria.—*Monthly Journ. Med. Sci.*, July 1850.

PART FOURTH.

BIBLIOGRAPHICAL NOTICES AND REVIEWS.

In consequence of so much of this number of our Journal being occupied by Reports of the proceedings of Societies, Notices of several new works and new editions have been crowded out.

PART FIFTH.

EDITORIAL.

[EDITORIAL CORRESPONDENCE]

READER: Were it compatible with the nature of things, I would like to entertain you for a short time with a proverbially loathsome and most revolting subject. Yes! I repeat it; such are the associations connected with it that even the *subject* has become too disgusting to be but seldom alluded to and scarcely ever discussed by medical writers. It is one of the *opprabria medicorum*. I allude to *Sea-Sickness*. And do you ask if I have a remedy for it? I

answer no. I do not propose to speak *particularly* of its therapeutics, nor even to impart what may be considered a solace under its depressing influence. I only design to allude to what may be termed its physiology.

The question then arises, what is Sea-Sickness? or rather in what does it consist? What is the remote, and what is the proximate, cause of it? These questions I am not competent to answer fully, but possibly I may be able to adduce a few thoughts that may lead to an elucidation of the subject. The real thing itself, so far as its subjective and objective symptoms are concerned, I need hardly say consists, first, in nausea, and then a disposition to go to the railing of the ship or boat, or to creep into one's berth or into some secluded corner away from all society; partly because of his indescribable loathing of every thing about him, and mainly, perhaps, to conceal the horrid grimaces and grotesque contortions of his countenance which invariably accompany these woful contractions of the diaphragm and abdominal muscles. Reader, you must receive my statements as authentic on this subject, as *I speak from actual experience!* I expect no sympathy from you, however, and why should I, while actual beholders, my fellow travelers, absolutely laugh in my doleful face, when I am with great pain to myself exhibiting to them this perverted or rather *inverted* function. The prayer of Burns,

> "Oh! wad some power the giftie gie us
> To see ourselves as others see us,"

never could have been uttered by a person suffering from Sea-Sickness in actual operation.

I lay down this proposition, that Sea-Sickness is caused by a feeble or defective circulation of blood in the brain. This, however, must be considered the more immediate cause as there are others still more inexplicable, though evident enough, acting antecedent to this perverted circulation. Perhaps my proposition may be made broader and more comprehensive, and still be quite as truthful, viz: that a deficiency of blood in the brain, or a feebleness of its circulation there, amounting to the same thing, tends to produce, *cæteris paribus*, nausea and vomiting. How this effect is produced is not easily understood, but the fact appears to be a general one, and susceptible of support by evidence not readily controverted. Let examples be adduced—take a simple one. A ligature is applied to the arm, a vein is opened and a quantity of blood is taken from the circulation. The effects are, first, a feeble pulse; second, giddiness;

third, syncope; fourth, nausea and vomiting; fifth, reaction, when nausea disappears. Ex. 2. Tartarized antimony is administered to a patient. Its effects are, first, to enfeeble the action of the heart and arteries; second, to produce nausea and vomiting; when reaction returns vomiting disappears. Ex. 3. A man falls from a height upon the pavement, and produces constitutional shock. He is found with a cold skin, and indistinct pulse and feeble circulation. If life is not at once extinguished, nausea and vomiting supervene, reaction follows, and all immediate danger is over. Other examples might be cited, but these are sufficient. And now, how are cases of Sea-Sickness analagous to those adduced. The order of sequence seems to be this: first, the rolling and tossing motion of a ship interrupts the functions of innervation; this is followed by a coldness of the surface, a feeble pulse, soon succeeded by nausea and vomiting. The powerful muscular contractions excited by vomiting, driving the blood to the brain and every portion of the system, bring on temporary reaction, and consequently an interruption to the stomach irritation. At any moment during the intensest Sea-Sickness, the nausea may be abated by placing the head in a dependent position, thus facilitating the determination of blood to the brain. Upon similar principles may be explained the salutary effects of brandy, and other cordial and diffusible stimuli in this distressing affection. They temporarily excite the action of the heart and induce a more vigorous circulation. I think, then, from the above facts and arguments, that we may conclude that a deficiency of blood in the brain, or a feeble circulation in that organ, however induced, tend to produce that peculiar affection termed Sea-Sickness, or nausea and vomiting under all circumstances, and that a vigorous circulation, whether in sickness or in health, whether constitutional or accidental, often, and *generally*, successfully resists *all* agents whose known specific effect is to invert the peristaltic action of the stomach. So far as the application of this principle to the subject under consideration is concerned, it may be, perhaps, confidently affirmed that those who have a vigorous circulation, in voyages upon the sea, are not so liable to Sea-Sickness as others, and that the contrary obtains with those having a circulation naturally feeble. Men suffer far less than women from this affection. But at the present time I must not pursue this subject further.

On the second of April, after having with a sad heart bid adieu to

land and cherished friends, and being "all aboard," the good ship Arctic, amidst a torrent of rain, the firing of cannon and the tears and sobs of parting friends, wheeled herself majestically into the bay of New York, and bounded away upon the dark old waters of ocean's troubled bosom. To a true American, who has spent the better portion of his life amid the wild and exhilerating scenery of the western continent, and formed strong attachments to its hills and valleys, its beautiful localities, and its generous, and, I may say, sleepless people, there is nothing very charming in a last look at its receding shores and its rugged but fading mountains, behind which are left an affectionate family and a cluster of valued friends whose society he may never again enjoy. But as gold, and the gems of the mountain, can be secured only by privation, toils, and hazardous adventure, and as *all* the choicest gifts of Heaven are mingled and surrounded by thorns, pitfalls and dangers, so we, seldom counting the whole cost, rush on full of hope in pursuit of the sweets of knowledge and earthly treasure.

For the first few days of our voyage the sea was rather rough; having side winds our ship was constantly rocked by the waves. This motion, though graceful, was not altogether acceptable or consistent with "harmony of function." The physiological relations of my stomach and its contents were perverted. Pylorus, who had hitherto been extremely obliging, took offence at this new order of things, closed his gateway, and tyranically passed an act that all intercourse between the stomach and bowels should be interrupted until affairs were in a more settled condition; thereupon, throughout all the intestinal regions business was suspended, and the contents of the stomach had nothing to do but to "back out." In fact, no poor creature was ever more sea-sick than myself—lying for several days and nights flat upon my back, except when I was under the necessity of paying my respects to the tin reception box at my side, the absolute *loathing* I experienced for *every thing* was perfectly indescribable. The thought of delicate luxuries, society, friends, family, and even my own existence, excited the most profound disgust. If the ship had been on fire, and all on board were called upon to leap into the life boat, I would have sooner sunk than made the effort. You cannot fail to imagine, dear reader, under these circumstances, how I enjoyed the poetry of "A life on the ocean wave, and a home on the rolling deep."

On the fourth day the sea became more calm, and though weakened by my sickness, I ventured upon deck for the purpose of snuffing the fresh air of heaven and of seeing the light of the blessed sun. While there, a painful incident occurred. I observed the passengers, as yet all strangers to me, hurrying along towards the forward deck. In a few minutes the Captain passed, and I politely asked if any accident had occurred. He replied, "nothing but a man had just been killed." A man been killed! thought I; can any thing be done? I staggered towards the scene of distress, and found that while one of the men was passing deeply among the gigantic machinery, in the engine room, he unfortunately made a miss step when an immense shaft came down with terrible velocity, and dashed his skull into a hundred pieces. In a half hour more I observed a huddle of men composed, partly, of the crew, forward of the wheelhouse. "I thither went," and saw the yet warm but lifeless body of the unfortunate man wrapped in a coarse canvass, with a heavy bar of iron tied firmly to his feet and legs, and a rude Star Spangled pall thrown lightly over him. Soon the "Man of God," the Rev. Mr. Cox, came forth from the cabin with robe and surplice that contrasted strongly with the drapery of the dead, and prayer book from which the funeral service for such occasions was rather pompously read. At a certain climax of the ceremonial service, the dead body, placed upon a board, was raised so as to allow it to glide almost perpendicularly, feet foremost, down into the awful abyss below! Oh how I shuddered, and gave utterance to the involuntary ejaculation, *God save me from a watery grave!*

It was found, on inquiry, that the deceased had left a widowed mother in New York who depended entirely upon him for support. A subscription paper was immediately drawn up by the passengers, and the sum of four hundred dollars contributed for her relief. An act worthy and characteristic of Americans.

On Sunday we beheld a beautiful spectacle. A magnificent Iceberg, seven miles distant, and rising more than two hundred feet above the sea. It gleamed in the sun beams white as the driven snow; but too formidable to the mariner, and defiant as Gibraltar. While we were in its neighborhood and admiring its beauty and majesty, the atmosphere was chilled almost to the freezing point, so that each of us drew our overcoats more tightly about us, and needed an extra garment. It seemed to absorb all the caloric within its own

horizon without being itself warmed by it. It reminded me of the avaricious, selfish, successful devotee to the shrine of Mammon—with whomsoever he comes in contact, from him he abstracts a dollar and in return imparts a chill.

The weather becoming more boisterous and stormy, I was compelled to retire from deck to my hateful berth, where I remained for several days unable to retain a particle of food upon my stomach. About the tenth day of our voyage the expectation of soon discovering land so overjoyed me that I could no longer remain below. How we gazed and anxiously looked, endeavoring to descry the semblance of a mountain peak or a rugged shore! You who have not been at sea cannot appreciate our feelings. Finally, as I came on deck, said a lady to me, "Doctor, can you see that mountain?" I looked with all the eyes I had, but could see nothing but watery waste and foggy mist that to me was impenetrable. But upon further trials, I could discover a dim outline of a towering mountain, whose top held converse with the clouds. It was the western promontory of the "Emerald Isle." As we neared the fair and verdant fields and rocky shores, I could but cry out, Is this the old world? Is this Europe, I have for a quarter of a century so longed to see? Is that really the land of potatoes and "botheration"? How charming and yet oh! how accursed! Speed on, oh speed on your way most noble ship, and hasten the time when I shall place my foot upon this old *Terra Firma*, the land of my ancestors, our mother country. As we passed on we saw Cape Clear, Fastnet Rock, Kinsdale Castle, and *Swate Ireland*; and how I listened to the waves eternally thundering against its rock-bound coast, can be better imagined than described.

At six o'clock on Monday the 14th, we arrived at and struck upon the bar, it being ebb tide, 14 miles from port. Here we found a little steamer waiting to take the mail; and such was my anxiety to put my foot on solid ground, that, abandoning every thing and without leave or license, I absolutely leaped from the railing of our ship into it. Arriving at the landing about sunset, I enjoyed my walk, be assured, from the docks to the Adelphi Hotel, about one mile. Here, for a few hours I fared sumptuously upon coffee, steak, (and such steak!) and, for the first time in my life, what is in England the omnipresent "muffin."

Schools, Hospitals, and Men of London.—April 23d.—Reader, do not suppose now that I am about to *bore* you with an elaborate dis-

course upon the text at the head of this paragraph. I think I know my duty and your wishes too well to be guilty of such an error. But I cannot pass by London and do justice to my feelings, if I said nothing of its profession, &c. I think I may safely say that, so far as the medical sciences and sound practical medicine and surgery are concerned, London is the literary metropolis of the world. Possibly some may take exceptions to this broad assertion, and allege that Paris, Germany, Dublin, Edinburgh, and our own country, should be ranked with London, in speaking of the fountains of professional authority. The Mississippi is the great artery of the west; and, although its waters are augmented by gigantic rivers from the east and from the west, yet the Mississippi is the same majestic Mississippi still, from its mouth to its head waters in the mountains.

We need but look at our libraries, at the locality of the authors of a majority of our medical works, to convince us that the British profession has set its impress upon, and gives tone to American medical literature. There are two potent causes for this condition of things. First, the physicians and surgeons of England, through the medium and instrumentality of their regulations, their money, their hospitals, and other facilities, are more thoroughly educated, and therefore more competent to make books. When these works are published, if meritorious, their copy-right secures to the authors sometimes an enormous profit. This of course encourages the production of a high order of professional works. Second. These works, which cannot often be excelled in point of merit by American writers, are immediately republished in the United States, and sold at a very low rate, without the tax of an author's copy-right. Few American writers can well afford to work for nothing, which they must do, in order that theirs shall be able to compete with foreign works, unless their excellence shall compensate for the cheapness of the works republished. These advantages, which the English profession possess, and the want of an international copy-right law, I fear, will operate as long as they exist against the growth of American literature.

London abounds in hospitals and charitable institutions. There are at least twenty substantial hospitals, besides various establishments which may be considered as asylums and retreats for purposes more specific and exclusive in their character. These institutions are supported *generally*, and for aught I know invariably, by voluntary contributions, and are under the best regulations, and conducted professionally by the ablest men in the profession. Connected with several of the hospitals are schools wherein all the medical

sciences are taught by lectures during eight or nine months of each year. The facilities to obtain a medical education in London, are sufficiently abundant. The lecturers are able, the hospitals extensive, and the clinical advantages as good as in any other city in the world; but the expenses of attending the lectures and hospitals, in the form of fees, are enormous, being, for one course something more than three hundred dollars; and again, the time occupied in the course of instruction, from the commencement of the worse than useless apprenticeship to the final examination, occupies from five to seven years. Much of this time, I am informed, is spent in any thing but professional pursuits. The proficiency and qualifications of students, are doubtless frequently creditable; but the standing of many of them is most graphically and truthfully described in a little book called "The London Medical Student, by Punch." The number of lectures average about three or four each day. There are two vacations; one, including the holidays, of half a month, and another commencing the latter part of March and continuing till May. Surgery and Practical Medicine occupy, each, but three hours a day in each week, and these the most important departments, are completed in March; so that at most but about sixty-six lectures, with the exception of clinics, are given to the class on each of these leading departments of medical science. The other departments are probably not more thoroughly taught than those already referred to.

My object, in alluding to the character or regulations of European schools, is to answer some of the objections which certain members of our profession are repeatedly making to the system of American medical education. The regulations of American schools, with them, are all wrong; and, to prove that they are so, they have only to compare or contrast them with those on the other side of the Atlantic, of which, by the way, they know little or nothing. And what do these reformers demand? 1st. The lecture term must be lengthened from four and a half to five or six months, and why? Because so much work is to be done, that more time is required; besides, the Trans-Atlantic Schools have longer sessions. In answer to these objections, I would reply that, as to *time*, if all the medical sciences can be taught thoroughly in six months, I say let the term be six months. But no one pretends this. It is impossible to give a complete course of instruction in *twelve* months. Therefore it is futile to contemplate the extension of lecture terms for the purpose of giving a *complete course.* I have already shown that the American Schools give as many lectures in a course as the European, and pro-

bably more. The principal difference consists in the period of time over which the lectures are spread, and not in the amount taught. I believe the fact that the great majority of medical students can profitably spend six hours a day in the lecture-room for four or four and a half months, and that consistently with the integrity of health and with other circumstances, and that they *cannot be retained quietly beyond that period*, has been substantially proved in America.—As in European schools, we might diminish the number of daily lectures and increase the length of the term. And what would be gained by this change? 1st, the expenses of the student would be materially increased; and, 2nd, while a few would be industrious and occupy every hour *out* of the lecture-room profitably, others would devote the time to relaxation and secular employment, while many, perhaps a majority, would while it away in idleness or dissipation. Medical students, from an intense desire to acquire a profession, from their circumstances, from habit, from the influence of example, and from other motives, will attend lectures faithfully, six hours a day, until they become exhausted, and then neither, nor all of these, can attract them to the lecture room. Lectures or no lectures, when mentally or physically exhausted, they will abandon it, or cease to appreciate the instruction imparted. In confirmation of this remark, I would here say that, before I left America, I enquired, *confidentially*, of one our most distinguished Professors, respecting his opinion of the extension of the lecture term beyond the average now adopted. He replied, "In doing so, you extend the term to the teacher, but not to the student. The students will not remain to the end of long session, and consequently the Professor must lecture to empty seats." This is doubtless true, and must be so from the nature of things. There are other educational reforms demanded by a portion of our profession, some of which are practicable, and others are not; but time, space and your patience, forbid an allusion to them.

The standard of medical education in London and Great Britain generally, is high, much higher it must be confessed than in our own country. Few, very few of even our best works are republished in England, yet many copies of them are imported and distributed among British libraries. American writers are as imperfectly known in Europe as their productions — and the reason is obvious. Our works, particularly our periodicals, are received and read to a very limited extent — much less than I supposed; and yet, while the English profession feels its own consequence, self-sufficiency and erudition, and displays sometimes a degree of arro-

gance which is invariably offensive to every man of sensibility, it looks upon Americans, especially American physicians, with great favor, and I may say admiration. During my brief sojourn here, I am daily and almost hourly astonished at some of the wonders or curiosities of the Old World, but nothing surprises me more than the unaffected consideration with which American physicians are treated here by their professional brethren, who are by their learning and imperishable works, renowned throughout the world. In visiting the celebrated Hospitals of St. Bartholomew, St. Thomas, Guy's, St. George's, the Royal College of Physicians and Royal College of Surgeons, &c., &c., the politeness and extraordinary attentions of Mr. Lawrence, Mr. Stanley, Mr. Bransley Cooper, Drs. Copland, Pereira, the venerable Dr. Paris, and others equally distinguished here, were so unexpected and undeserved that I was embarrassed and at the same time ashamed of our American reserve and coldness under similar circumstances. For instance, I asked Mr. Stanley to introduce me to Mr. Lawrence, the author of our well known work on the eye. On doing so, Mr. Lawrence shook me cordially by the hand, said he was always happy to see Americans, and invited, without further ceremony, myself and Professor Buchanan, of Tennessee, to spend the next Sabbath with him at his country seat ten miles from London. We accepted the invitation, and at 10 o'clock, A. M., we took the train which left us within half a mile of his house. On our way thither we had an opportunity to display our Yankee propensities to ask questions and to inquire "the way," and in return the common people had as good an opportunity to exhibit the national peculiarities of John Bull. Of the first man we met we inquired the way to the residence of Mr. Lawrence. He replied eagerly that we should go directly "*hon*," and that we should see his 'ouse just hopposite the plough. *Hon* we went about as wise as we were before. We next met a fresh chubby boy of whom we inquired. He vociferated that these were all "*hour*" gardens, and that we should find just "*hopposite*" the plough a big gate, there we should turn "*hin*." After a few moment's walk we came to a small public house whose only sign was the picture of a plough upon a large sign board; then we were reminded that the English never talk of hotels, or taverns, or public houses, but always refer to them by their signs.

We found Mr. Lawrence at home and awaiting our arrival. After the usual salutations, he showed us his library, room for statuary and splendidly furnished parlor, and then took us over his little farm

of sixty acres almost in sight of the suburbs of London. The whole was laid out into lawns, parks, gardens and pleasure grounds, divided by winding avenues, beautifully trimmed hedge rows, and dotted here and there with cedars of Lebanon, clusters of rare foreign shrubbery, statuary, obelisks and pools, with a charming serpentine lake, clear as crystal, passing through the midst, so as to perfect the beauty of this earthly Paradise. In one part of the grounds were arranged extensive green and hot houses, where Mrs. Lawrence (now at church,) was cultivating a vast collection of ornamental plants from all parts of the world — mostly from the warmer and tropical regions. On our return from our rambles we partook of the more substantial hospitalities of Mr. Lawrence, and conversed upon professional and miscellaneous topics, upon which we found him remarkably intelligent and instructive. Finding the afternoon rapidly waning, we bid our distinguished friend, his amiable and interesting lady, his son and two daughters, adieu, and left for London, exceedingly gratified with our visit and entertainment. I might speak of many other similar instances of politeness and unsought attentions from our English professional brethren, but space will not permit. I speak of these to show the feeling that exists here towards American physicians, and that if the latter will take opportunities to call upon them, whether formally introduced or not, they will generally meet with a cordial reception, and find them always ready to facilitate their professional pursuits without money and without price. Indeed, this remark is not alone applicable to members of our profession. I am daily surprised not only at the good order that prevails throughout every street, avenue and corner of London, but at the civility and politeness of citizens to strangers. The streets of London are extremely irregular, short, and frequently nameless upon the corners, and a stranger is often lost among the labyrinths of this great Metropolis. On enquiring of gentlemen the route, when quite lost, they not only take pains to point out the way, but often go a distance with me to make me sure of my destination. And here my surprise is frequently mingled with a little amusement with these kind gentlemen. I know not that I have *whistled, whittled* or *swapped knives* with any one since I have been in Great Britain, and yet not a day passes but some body tells me I am an American. Of course I reply, "I a'nt nothing else."

Since my residence here I have visited a large number of the

charities and other institutions of London — its Tower, alternately the palace and prison of kings — Westminster Abbey, the sepulchre for ages of kings, heroes, statesmen, poets, philosophers and prelates — Westminster Hall, the theatre of Bacon, Burke and Jeffreys, — Parliament, and most of the sights which are renowned abroad. Generally I am struck with admiration at the gorgeousness, the pomp and display of gilded halls and costly decorations, and again I shudder at the melancholy and sometimes terriffic associations which history throws around these objects of interest, immortal because once steeped in the blood of innocence.

This is late in the evening. To-morrow morning the Great World's Exhibition is to be opened by Her Majesty, and having a season ticket, I must be up betimes, or I shall be too late; as more than twenty thousand persons have already obtained them, and will be present.

I have seen the opening of the World's Exhibition. Shall I make an attempt to describe it? How is it possible that my feeble pen should draw a picture of a palace constructed entirely of iron and glass, covering eighteen acres of ground, and containing the choicest specimens of industry and of the fine arts of all the nations of the world, and thirty thousand persons arrayed and decorated in the most gorgeous and costly attire, together with more than one hundred thousand people without its walls, but within the precincts of Hyde Park? The most vivid imagination fails to picture the vastness and magnificence of the scene. Many writers of great ability have endeavored to describe the opening of the Exhibition, but all have come short of the reality. As most of you, my readers, have had, probably, an opportunity to read from able pens such descriptions, I deem the attempt here worse than a waste of time and space. I might say, however, that as "*Her Majesty the Queen* was graciously pleased to open the Exhibition in state," *she* became the great object of interest and centre of attraction, particularly to Americans. Her entrance was anxiously awaited, and greeted with "thundering applause." During her passage through the nave, attended by her court and the royalty of other nations present, and surrounded by her little sovereigns, all eyes were strained from their sockets as if immortality depended upon the sight. For an hour at least, all ages, sexes and conditions — all diseases, idiopathic and symptomatic, internal and

external, and particularly *corns*, were treated by one tremendous remedy, *compression*. I do not say it was a sovereign remedy, but a remedy with which the people treated their sovereign, as well as themselves.

Among the articles exhibited, our profession was rather sparingly represented, and yet perhaps as fully so as could have been expected. Surgical instruments were plentiful, and beautifully executed, but most of them were from the London and Parisian manufactures. Our countryman, B. F. Palmer, of Philadelphia, exhibits, I have no doubt, the most perfect artificial leg in the world. It is a most astonishing piece of mechanism, and makes a remarkably excellent substitute for, and a decided *improvement* on many of nature's more clumsy specimens.

The American Department in the Crystal Palace is in many respects decidedly *American*. I mean by this that it is decidedly *extensive*, so far as territory is concerned. If John Bull would not allow Jonathan to go as far north as 54° 40″, he certainly allowed him full swing in his glass palace. Our commissioner asked for a large amount of space, and all he asked was granted by the royal commission. The products of our industry not being quite as multitudinous as our country is extensive, our department here is to a considerable extent unoccupied, and what we have, in perfection of workmanship and splendor, falls behind those of most other nations. It is really a mortification to know that the United States has partially failed to furnish her proportion of the attractions in this great Exhibition at London, particularly when those who point the finger and deride us for it, do not comprehend the great obstacles with which we have had to contend. There is however a consolation in the thought that although Europe by her favored few surpasses us in the arts and sciences, yet we are a great and free people. The United States of America contains the highest mountains, the largest rivers, the richest soil, the best institutions, and the *prettiest ladies* in the world. And more than all this, they form an asylum, a comfortable and happy home for the poor starving and oppressed millions of the Eastern Continent.

In my next I will give you some incidents and sketches of my tour to and sojourn in Paris, and something respecting the comparative advantages of Paris and London for facilitating professional pursuits.

[We have condensed the following report from the Philadelphia Medical Examiner.—Ed.]

American Medical Association.—*Fourth Annual Meeting, held in Charleston, May* 6, 1851.—The Association met at 11 o'clock, at St. Andrew's Hall, Broad street, the President, Dr. Mussey, in the Chair, and Dr. H. W. Desaussure, Secretary.

The Association having been organized, Dr. Thomas Y. Simons, the Chairman of the Committee of the South Carolina Medical Association, in a warm and hearty address, welcomed the Delegates present from the other States, to the City and State, on behalf of his associates, which was responded to in a becoming manner by the President.

Dr. Frost, on behalf of the Committee of Arrangements, read the list of Delegates present: 197 present, and 27 States represented.

Tne President of the Association read a letter from Dr. Stille', resigning his office, in consequence of the impaired state of his health.

On motion of Dr. Arnold, of Savannah, Ga., it was proposed that the letter of Dr. Stille' be placed on record, in compliment to him, for the interest he has manifested in the Association.

Dr. Arnold offered the following resolution, which was adopted:

Resolved, That a Committee of one from each State represented in the Association, to be chosen by their respective Delegates, be appointed to nominate suitable officers to be elected for the ensuing year.

On motion of Dr. Frost, the Association took a recess of ten minutes, to enable the Delegation to appoint one of their number a member to constitute the Nominating Committee, in compliance with the above resolution.

The President of the Association, at this stage of the proceedings, read an address of some length on matters connected with the profession, and the advancement of medical science; which was well received, and elicited the commendation of those present.

On the re-assembling of the Convention, the President reported the following gentlemen as having been selected as a Committee on Nominations from the different State Delegates, viz: Dr. Geo. Mendenhall, of Ohio; B. R. Wellford, of Virginia; Joseph Fithian, of New Jersey; R. D. Arnold, of Georgia; G. W. Miltenberger, of Maryland; H. R. Frost, of South Carolina; N. G. Pittman, of North Carolina; W. H. Anderson, of Alabama; A. H. Stevens, of New York; Usher Parsons, of Rhode Island; Joseph Carson, of Pennsylvania; Z. Adams, of Massachusetts; Thomas Reyburn, of Missouri; James Jones, of Louisiana; J. B. Flint, of Kentucky; John Sloan, of Indiana; C. Boyle, of the District of Columbia; and J. B. Lindsley, of Tennessee.

The Nominating Committee, through their Chairman, then read the subjoined names as suitable candidates for officers of the Association for the ensuing year, viz:

President—Dr. James Moultrie, of South Carolina.

Vice Presidents—Dr. George Hayward, of Massachusetts; Dr

R. D. Arnold, of Georgia; Dr. B. R. Wellford, of Virginia; Dr. J. B. Flint, of Kentucky.

Secretaries—Dr. H. W. Desaussure, of South Carolina; Dr Dr. P. C. Gooch.

Treasurer—Dr. Isaac Hays.

On motion of Dr. La Roche, of Pa., the Report was accepted, and the gentlemen thus nominated were elected the officers of the Association for the ensuing year, and were invited to take their seats.

The President elect then took the chair, and in a few appropriate remarks, returned his thanks for the honor thus conferred on him by the Association.

The Secretary read a report, transmitted to him from the Committee on Unfinished Business, appointed at the session of 1850.

On motion of Dr. Arnold, of Ga., the report was accepted, and laid on the table.

On motion of Dr. Gaillard, of S. C., the following resolution, offered by Dr. Drake, of Cincinnati, at the session of 1850, was taken up for consideration.

Resolved, That the second section of the Regulations of the Association be so amended, as to require that candidates for membership, by invitation, be nominated in writing by five members; that when elected they shall enjoy all the rights of Delegates; and that all permanent members shall be entitled to vote.

After some discussion,

On motion of Dr. A. H. Stevens, of N. Y., the resolution was referred to a committee, consisting of Drs. Drake, of Ohio, Wood, of Pa., and Wellford, of Va.

Dr. Stevens, of N. Y., offered the following resolution, which was discussed by Drs. Storer, of Mass., and Moore, of Ga., and finally rejected:

Resolved, That a committee be appointed to report to the Association the business before it, and to offer such suggestions as they may deem advisable for the due discharge of the same.

On motion, the Association adjourned, to meet on Wednesday, at 10 o'clock.

Second Day—Morning Session.

The Convention met pursuant to adjournment, the President in the Chair.

The minutes of the previous meeting were read and confirmed.

Dr. Wood asked and obtained leave to read the following report, on amending the Constitution, on behalf of himself and Dr. B. B. Wellford:

The committee to whom was referred the proposition of Dr. Drake, for an alteration of the rules in relation to the admission and rights of members, have the honor to report as follows:

There are two distinct branches of the proposition: the first of which relates to the invitation of medical men, not delegates, to participate in the proceedings of the Association; the second has in view the extension of the right of voting to permanent members.

The committee agree in the general purport of the first part of the proposition. As it now stands, the rule admits of a too easy admission to the privileges of members, and it is susceptible of great abuse. It might happen, in a place where the number of resident physicians was very considerable, that sufficient might be introduced to control the decisions of the delegates. To guard against such a result, the committee recommend, that, in addition to the provision that none should be invited by the Association, unless upon a previous written proposal, by five delegates, the existing rule should be so altered as not to confer upon the invited members the privilege of voting.

In relation to the second part of the proposion,—that, namely, which gives the privilege of voting to permanent members,—the committee do not consider its adoption advisable, on the following grounds: This association is essentially a representative body. Its opinions are supposed to be those of the societies or associations by which the delegates are appointed, and go forth to the world with the authority in some degree of the medical profession generally. Now, if permanent members were permitted to vote, they would express their own individual opinions, and support their own individual preferences; both of which might be in direct opposition to those of the delegates, and not fairly representative of general medical sentiment. It is easy to conceive, that combinations among permanent members might be formed, more powerful than the properly delegated body, which might thus be overruled in its decisions. The opinions or wishes of a comparatively few individuals might thus go forth to the world as those of the profession at large; and private purposes might be answered at the expense of the general good. This would defeat the main objects of the Association, and prevent it from continuing, what it may now be considered to be, the exponent of enlightened medical sentiment in this country.

The committee, therefore, recommend that the question on Dr. Drake's proposition be taken separately upon its two branches; that the first be adopted with a modification, withholding the right of voting from invited members; and that the second, which confers this right upon permanent members, be not adopted.

GEO. B. WOOD,
Charleston, S. C., May 7, 1851. B. R. WELLFORD.

Dr. Drake then read the subjoined minority report:

The undersigned, a minority of the committee to whom was referred the resolution for amending the second section of the Constitution, begs leave to report, that in his opinion it is expedient, and will be found promotive of the great objects for which the Association was formed, that "members by invitation" should not be admitted, except under a written nomination, by five members; that when thus chosen, they should enjoy all the rights and privileges of delegates, including permanent membership; and that all permanent members should be entitled to vote. With these views, the undersigned respectfully submits a revision of the resolution into the following:

Resolved, That members by invitation shall be nominated, in writing, by five members, which nomination shall be made a matter of record; that when elected, they shall enjoy the rights and privileges of delegates, and remain as permanent members of the Association.

Resolved, That all permanent members shall have the right of voting.

Respectfully submitted.

DAN. DRAKE.

Dr. I. Hays moved to take up the majority report, which motion was carried.

Dr. Arnold spoke against the article of the Constitution authorizing invited members to vote.

Dr. Wood explained his report, and urged its adoption.

Dr. Davis, of Chicago, said that there was much misunderstanding in regard to the intention of the Constitution in respect to the members by invitation. He hoped that the Constitution would be strictly acted up to, and that members should be invited only "from sections not otherwise represented."

Dr. Wood said his was an amendment, and not a repeal of the old provision.

Dr. Drake responded: He had waited for arguments against his resolution, but had heard none. He then entered into a long argument in favor of *popularizing* the Association with the Profession in the United States, and took ground in favor of a permanent place of meeting at Washington City.

Dr. W. Atlee, of Lancaster, said he could see no harm in giving the privilege of voting to invited members who came from unrepresented localities, but was opposed to the right of voting proposed to be given to permanent members.

Dr. Meigs, of Philadelphia, asked whether a gentleman would be invited to attend without any privileges; and went on to say that he hoped the Convention would have five, ten, or even twenty thousand in attendance at some future period.

Dr. Hooker, of Connecticut, begged to be allowed to offer the following resolution, the resolution of Dr. Drake having been laid on the table for the present:

Resolved, That no member be permitted to speak more than ten minutes at any one time, in any one debate.

Dr. Phelps, of N. Y., offered to amend the resolution by inserting "fifteen;" which motion was lost.

The resolution, as offered by Dr. Hooker, was then adopted.

Dr. Hays moved to lay the subject on the table; and added, that by a constitutional provision it was required to lay over one year.

The motion was seconded by Dr. Tucker, of Va.

Dr. Dickson, of S. C., asked if the motion swept off the whole resolution, and was answered affirmatively by Dr. Hays.

Dr. —— said if the matter was postponed now, they would not be out of difficulty, because all that is necessary to defeat it next year would be to move to amend it, and it would have to lay over a year again, &c.

The matter was finally laid on the table.

Dr. Wood, of Pa., called up the second part, or that portion giving to permanent members the right to vote.

The majority committee accepted the substitute of the minority committee, which was read as follows, viz:

Resolved, That all permanent members shall have the right of voting.

After discussion, the question was taken on the adoption of the resolution, which was lost by a large majority.

Dr. I. Hays, the Treasurer of the Association, then read the report of the committee of Publication, and also the report of the Treasurer.

The subjoined resolutions, appended, were read and adopted:

1. *Resolved*, That the assessment for the present year shall be three dollars.

2. *Resolved*, That those delegates who pay the assessments shall be entitled to one copy of the transactions for the present year; and that the payment of two dollars, in addition, shall entitle them to two additional copies.

3. *Resolved*, That permanent members shall be entitled to one copy of the transactions for the present year on the payment of two dollars, and three copies on the payment of five dollars.

4. *Resoleed*, That Societies which have been represented in the Association shall be entitled to copies for their members on the same terms that copies are furnished to permanent members.

5. *Resolved*, That permanent members, unless present at the meeting as delegates, shall not be subject to any assessment.

6. *Resolved*, That any delegate who is in arrears for his annual assessment, shall not be considered as a permanent member.

7. *Resolved*, That the several committees be requested to bring to the meeting of the Association their reports, correctly and legibly transcribed; and that they be required to hand them to the Secretaries as soon as they have been read.

All which is respectfully submittted.

ISAAC HAYS,
D. FRANCIS CONDIE.

Philadelphia, April 20, 1851.

Professor Eve, chairman of committee on Surgery, then proceeded to read his report.

A motion was made by Dr. Davis to commit the same to the committee on Publication, which was adopted.

Dr. Hays moved to read Dr. Flint's report by its title, "Practical Medicine," and refer the same to the committee on Publication: which motion was adopted; and several hundred copies, printed and furnished by the author, were directed to be distributed.

A motion was then made to adjourn till 5 o'clock, P. M., which was adopted, and the Convention adjourned.

Afternoon Session.

The President having organized the meeting,

Dr. Boyle, of Washington, offered a resolution that the Association in future meet at Washington City.

Dr. C. P. Johnson, of the Virginia Medical Society, extended an invitation to meet at Richmond; Dr. Jones, of the University of Louisiana, to meet in New Orleans; Dr. J. P. Johnson, of Missouri, to meet in St. Louis. The resolution and invitations were referred to the committee on Nominations.

The President suggested to the Society the propriety of appointing the Standing Committees at an early date.

Dr. Wood remarked that there was a proposition to abolish Standing Committees.

Dr. Hays said he was opposed to these committees, but would not press an alteration.

Dr. Tucker moved that the appointment of the Standing Committees be referred to the committee on Nominations, which motion was adopted.

Dr. Jones, of La., resigned as a member of the committee of Nominations; and Dr. Fenner, of New Orleans, was appointed in his place.

Dr. Parsons then moved that the committee on Nominations be requested to resume its labors, which was adopted.

Dr. Wragg, of Charleston, moved that the report of the committee on Prize Essays be read, and then that the Obstetric report be brought up.

The report on Prize Essays was then read, and certain resolutions appended thereto were adopted; when,

On motion of Dr. Ready, of S. C., the whole matter was referred to the committee of Publication.

Dr. Storer, of Boston, chairman of the committee on Obstetrics, read the report on that subject, He stated that he had received a letter from Dr. Thompson, of Illinois—that he was the only member of the committee who had aided him in any degree. He mentioned this fact, because he had to hold himself entirely responsible for all the inaccuracies, &c.

Dr. Phelps, of N. Y., moved that the report be referred to the committee of Publication.

Dr. Robertson, of S. C., moved that the statistics, alluded to in the report, be stricken out, as the author of them was not a reliable man.

Dr. Storer seconded the motion.

Dr. Bond moved to postpone the report until morning, which was seconded by Dr. Gilman.

A short debate here ensued; when it was finally agreed to recommit said portion of the report, to be corrected and laid before the Association in the morning.

On motion, the Convention adjourned.

Third Day—Morning Session.

The President, Dr. James Moultrie, in the Chair.

The minutes of the previous meeting were read, and after some slight amendments were confirmed.

Dr. J. M. Smith, of Mass., moved that the report of the committee

on Medical Education be made the special order, after the disposal of the report of the committee on Obstetrics.

Dr. Gaillard, on behalf of the committee of Arrangements, read a list of delegates, as registered since the last report.

Dr. Campbell, of Ga., presented a model of a mal-formation of the knee joint, the patella being absent.

Dr. Wood, of Pa., offered the following resolution:

Resolved, That colleges, exclusively of Dentistry and Pharmacy, are not recognized by the Association as among the bodies authorized to send delegates to its meetings.

Dr. Wood, of N. Y., moved to amend, by dividing the resolution, so as to take the question, first, on the reception of delegates from colleges of Dentistry; secondly, on the reception of delegates from colleges of Pharmacy.

The amendment having been accepted, the question of the reception of delegates from colleges of Dentistry was debated.

Dr. Lamb moved an indefinite postponement of the resolution, which was lost.

Dr. Yardley, of Pa., asked and obtained leave to read the subjoined resolution, presented by the Philadelphia County Medical Society:

Resolved, That all the medical colleges in the United States are hereby earnestly and respectfully requested to hold a Convention, through delegates respectively chosen by them, at least once in every six years, to take into consideration the proper method of harmoniously elevating the standard of medical education in the said colleges.

The discussion of the original question was then resumed.

A motion was finally made by Dr. Hays, of Pa., that the whole resolution of Dr. Wood, including colleges of Dentistry and Pharmacy, be referred to a special committee of five members; which resolution was adopted.

On motion of Dr. Yardley, of Pa., the resolution presented by the Philadelphia County Medical Society was also sent to the same committee.

Dr. Jones, of N. C., offered the following resolution:

Resolved, That all the medical colleges in the United States are hereby earnestly and respectfully requested to hold a Convention, through delegates respectively chosen by them, at least once in every six years, to take into consideration the proper method of harmoniously elevating the standing of medical education in the said colleges.

The order of the day was then called up, when Dr. Storer reported that he had erased the statistics referred to yesterday, and that he placed the report in the hands of the Association. Dr. S. said that there was objection to the remarks on the subject of Dr. Gilman's paper on the speculum uteri. He asked that he be permitted to remove the unnecessary expression of opinion in regard to that subject. He further added that he had taken from the journals these facts, &c., and was not therefore responsible for the correctness of the papers, &c.

Dr. Bond, of Md., remarked that there were charges in these reports which he did not individually indorse, but which got out in a book under the sanction of the Association.

On motion of Dr. Davis, the report was referred to the committee on Publication.

At this stage of the proceedings, Professor S. S. Haldeman, of Lancaster city, Pa., through Dr. John L. Atlee, presented to the Association an essay on Latin Pronunciation, of which he is the author; and which, on motion of Dr. Atlee, was referred to the committee on Medical Literature.

On motion, the regular order was suspended for the reception of the report of the committee of Nominations, which was read and laid on the table.

Dr. Hays then called up the resolution on page 43, vol. 2, of the transactions of the Association, and moved to strike out "all that relates to committees," &c.

The motion was seconded by Dr. Stevens, and urged by Dr. Drake, who read some ten or twelve special points, which he said ought to occupy the Association, instead of being occupied with epitomes of Rankin and Braithwaite.

Dr. Hooker, of Conn., spoke of the looseness of committees and editors of the journals.

Dr. Davis thought that they could decide on the matter at once.

Dr. Hays proposed to dispense with the Standing Committees.

The question was then taken on the resolution, which was adopted.

Dr. Wood, of Pa., offered the following resolution, which was adopted:

Resolved, That a committee be appointed to take into consideration the arrangement of a committee for future action, to report as speedily as possible.

The chairman of the committee on Medical Education was about to read the regular report on that subject, when Dr. Drake moved the suspension af the reading till after the recess, as it was a very long report.

On motion of Dr. Johnston, of Mo., the report of the committee on Medical Literature was then taken up.

Dr. Desaussure announced that Dr. Davis would read a paper entitled "An Experimental Inquiry concerning some Points connected with the Process of Assimilation and Nutrition."

Dr. Reyburn, of Mo., presented and read the report of the committee on Medical Literature. In the course of his reading the report, he gave way to a motion to adjourn.

Afternoon Session.

The President took the chair at half-past 5 o'clock, and organized the meeting.

The Secretary announced the following gentlemen as having been appointed by the President, under resolution of this morning, concerning a committee for the arrangement of business, for the occupation of the Association in future: Drs. G. B. Wood, of Pa.; I. Hays

D. Drake, A. H. Stevens, W. Hooker, B. R. Wellford, and S. H. Dickson.

The following gentlemen were appointed a committee under a resolution in regard to schools of Pharmacy and Dental Surgery, viz: Drs. Hays, Stevens, Yardley, Storer, and Jones.

Dr. Dickson moved the following preamble and resolutions, which were seconded by Dr. Bond, and unanimously adopted, without debate:

Whereas, efforts are being made to repeal the law of 1847, which confers protective rank on the members of the medical department of the army; therefore,

Resolved, That the American Medical Association views with regret the existence of hostility to the act of Congress, approved February 11, 1847, which confers legal rights, and equality with other staff departments, on the medical officers of the army, and gives them a position to which the importance and character of the profession entitles them.

Resolved, That copies of these resolutions, with the resolutions of the Association, passed at its last annual meeting, on the same subject, be transmitted to the Secretaries of War and of the Navy, through the chiefs of the medical department of each service, and to the presiding officers of the Senate and House of Representatives of the United States.

The reading of the report of the committee of Medical Literature was then concluded.

On motion, the report was adopted, and referred to the committee on Publication.

The report of the committee on Medical Education was then called for, and as the hour was late, the chairman read only so much of it as relates to Demonstrative Midwifery, which had by special resolution been referred to the committee.

On motion, the report was accepted, and referred to the committee of Publication.

Dr. Dickson presented the following resolution, which was adopted:

Resolved, That this Association unanimously approve of the opinions expressed in the report of the committee on Medical Education in respect to Demonstrative Midwifery.

The Convention then adjourned.

Fourth Day—Morning Session.

The President, Dr. James Moultrie, in the Chair.

The minutes of the last meeting were read and confirmed.

The report of the committee on Medical Education being the special order, Dr. Stevens, of New York, asked and obtained leave to introduce the following resolutions:

Resolved, That the members of this Association cannot separate without expressing their grateful sense of the hospitalities, and numerous delicate attentions received from their medical brethren of South Carolina and the citizens of Charleston.

Resolved, That a committee be formed to procure a tablet with a suitable inscription, commemorative of this meeting, and the feeling it has elicited; to be placed at the disposal of the Medical Asssociation of South Carolina.

This tablet is here placed by the American Medical Association, to commemorate their annual meeting in the city of Charleston, in May, 1851, and to signalize their gratitude for the extraordinary professional and social enjoyments that accompanied it.

The resolutions having been seconded were adopted; and Dr. Stevens further moved that Drs. Hayward, of Mass., and F. A. Ramsey, of Tenn., and himself, constitute the committee.

Dr. Ramsey, of Tenn, asked and obtained leave to read a letter from Dr. E. D. Fenner, of Louisiana, and offered the following resolution on the subject, which was adopted:

Resolved, That the efforts of Dr. Fenner, to place on a firm and durable basis, an annual publication, embracing Medical Reports from the whole Southern portion of the Union, merits the commendation of this Association, and should receive solid support from American physicians.

Dr. Hays, of Pa. asked and obtained leave to call up for consideration, so much of the report of the nominating committee, as relates to the selection of the next place of meeting of the Association, and the appointment of the committee of Arrangements and the committee of publication, the other standing committees having been abolished. The report having been read, Dr. Drake, of Ohio, made an urgent appeal in favor of Washington City as the next place of meeting. The question being taken on the adoption of that part of the report of the committee, which proposed Richmond, (Va.,) as the next place of meeting, it was adopted by a large majority. The question being taken on the confirmation of the committee of Arrange ments and Publication, the nominations of the committee were confirmed.

Richmond, Va., was selected as the next place of meeting by the Association, and the following gentlemen appointed a committee of Arrangements, viz: Drs. R. W. Haxall, Chairman; Carter P. Johnson, James Beale, Chas. B. Gibson, S. Maupin, R. D. Haskins, C. S. Mills and M. P. Scott. Committee of Publication—Drs. Hays, of Pa., G. Emerson, of Pa., D. F. Condie, of Pa., H. W. Desaussure, of S. C., I. Parrish, of Pa., P. C. Gooch, of Va., and G. W. Norris, of Pa.

Dr. Hooker, of Conn., chairman of the committee on Medical Association, completed the reading of the report of the committee, and offered the following resolutions:

Resolved, That the abuses which exist in the modes of medical education pursued in this country, demand the serious consideration of the profession.

Resolved, That free discussion in relation to the causes is an important means of effecting their removal.

Resolved, That in the opinion of this Association no effort to remove these abuses can succeed, that is not based on a reform in the public sentiment, both of the profession and of the community.

Resolved, That this reform, so far as the profession is concerned, is to be effected mainly through its organization, and that it is therefore incumbent upon every physician to do all that he can to give them character and efficiency.

Resolved, That this Association have confidence in all proper efforts which have for their object a reform in the sentiments and practice of the community in relation to medicine and the medical profession.

Resolved, That the recommendations of this Association at its former meetings in regard to education, both preliminary and medical, be re-affirmed, and that both the schools and private preceptors be still urged so to do their duty as to secure to the community a well educated profession.

Resolved, That in the work of medical reform, while all precipitate movements should be avoided, we should aim at a steady advance, from year to year, till a thorough system of education be established by the profession throughout our country.

Dr. Wood, of Pa., asked leave to suspend the order usually taken with reports. Permission being granted, he read the following report, which was adopted:

The committee to whom was referred the subject of arranging a plan of committees, for future action, in place of the standing committees abolished by the Association, have the honor to report, as follows:

It appears to them that the most feasible plan of accomplishing the objects of the Association, is to select certain subjects, which may be considered as suitable for investigation, and to refer these subjects to special committees, to be appointed before the close of the present session, and to report to the next. Such a selection the committee have accordingly made, and will offer to the consideration of the Association.

As an additional means of securing valuable contributions, they propose, also, the appointment of a committee, whose business it shall be, in the interval between this and the next session, to receive original volunteer papers, upon any subject which their authors may choose; to decide upon the merits of these papers; and to present to the Association, at its next session, such of them as they may deem worthy of receiving this direction. With a view to increase competition, they think it advisable that a prize of fifty dollars, or a gold medal of that value, be awarded to each of the five papers presented to the Association, or any smaller number of them, which the committee may consider most meritorious, and the Association may resolve to publish.

In reference to the resolution presented in the report of the standing committee on Medical Literature, and referred to the present committee, they have only to observe that, as its ends will probably be most effectively obtained, by the adoption of the general plan which they have already brought before the notice of the Association, they do not consider it expedient to make any further report.

As to the appointment of the special committees referred to, your committee think that the most convenient plan will be to refer to a special committee, the nomination of a chairman for each, who shall

then select, at his convenience, two individuals, to aid him, with the restriction only, that the persons so selected, shall be members of the Association.

To the same nominating committee, may be referred the appointment of the general committee, whose business will be to receive and judge whatever papers may be submitted to them. As the members of this general committee must frequently compare opinions, it will be desirable that they should reside near each other; and it is accordingly proposed that they should be chosen from one neighborhood. If the plan be found to work well, this locality may be changed every year, so that each section of the Union may, in its turn, be charged with this duty. The committee would suggest that the general committee should be first chosen from members of the Association residing in Boston or its neighborhood, as the most northern point.

To embody these suggestions in due form, the committee offer the following resolutions:

I. *Resolved*, That committees of three be appointed to investigate and report severally on the following subjects:

1st. Causes of the Tubercular diathesis.

2d. Blending and conversion of the types of fever.

3d. The mutual relations of Yellow Fever and Bilious Remittent Fever.

4th. Epidemic Erysipelas.

5th. Acute and Chronic diseases of the Neck of the Uterus.

6th. Dengue.

7th. The Milk Sickness, so called.

8th. Endemic prevalence of Tetanus.

9th. Diseases of Parasitic origin.

10th. Physiological peculiarities and diseases of negroes.

11th. The action of water on lead pipes, and the diseases which proceed from it.

12th. The alkaloids which may be substituted for quinia.

13th. Permanent cure of reducible hernia.

14th. Results of surgical operations for the relief of malignant diseases.

15th. Statistics of operations for removal of stone in the bladder.

16th. Cold water dressings.

17th. The sanitary principles applicable to the construction of dwellings.

18th. The toxicological and medicinal properties of our cryptogamic plants.

19th. Agency of the refrigeration produced through upward radiation of heat as an exciting cause of death.

20th. Epidemic diseases of New England and New York.

21st. Epidemic diseases of Pennsylvania, New Jersey, Delaware and Maryland.

22d. Epidemic diseases of Virginia and North Carolina.

23d. Epidemic diseases of South Carolina, Georgia, Florida and Alabama.

24th. Epidemic diseases of Mississippi, Louisiana, Texas and Alabama.

25th. Epidemic diseases of Tennessee and Kentucky.
26th. Epidemic diseases of Missouri, Illinois, Iowa and Wisconsin.
27th. Epidemic diseases of Indiana, Ohio and Michigan.

II. *Resolved*, That a committee of Nomination be appointed, whose duty it shall be to nominate one chairman for each of the above committees.

III. *Resolved*, That each of the chairmen thus nominated shall select, at his earliest convenience, the members of the Association to complete the committees.

IV. *Resolved*, That a committee of five members be appointed, to be called the committee for Volunteer Communications, whose duty it shall be, in the interval between the present and next succeeding sessions, to receive papers upon any subject from any persons who may choose to send them, to decide upon the merits of these papers, and to select for presentation to the Association, at its next session, such as they may deem worthy of being thus presented.

V. *Resolved*, That the committee for Volunteer Communications, shall have the power to form such regulations as to the mode in which the papers are to be presented, and as to the observing of secrecy, or otherwise, as they may think proper.

VI. *Resolved*, That the selection of the members of this committee be referred to the same nominating committee, whose duty it will be to appoint the chairman of the several special committees, as above directed; with this restriction, that the individuals composing it shall reside in the same neighborhood.

VII. *Resolved*, That a prize of fifty dollars be awarded to each of the volunteer communications reported on favorably by the committee, and directed by the Association to be published: Provided, that the number to which the prize is thus awarded do not exceed five; and provided, also, if the number approved and directed to be published exceed five, that in such case, the prize shall be awarded to the five which the committee may determine to be the most meritorious. All of which is respectfully submitted.

Charleston, May 9, 1851. Geo. B. Wood, *Chairman.*

Dr. Hays, of Penn., gave notice, that at the next meeting of the Association, he should offer an amendment to the constitution, line 4, so as to read $10 instead of $3.

Dr. Atlee, of Penn., remarked on the value of the report of the committee on Medical Education, and offered the following resolution, which was adopted:

Resolved, That it be recommended to the several State Medical Societies throughout the Union, to procure a republication of the report of the committee on Medical Education, for general distribution among the profession.

Dr. Drake offered the following resolution:

Resolved, That in the opinion of the Association, the students of our schools should be required to matriculate within the first days after the opening of the sessions, and continue their attendance to the end of the terms, taking with them evidence of the same, to be presented with tickets of the professors when they become candidates for degrees.

The resolution was adopted, and Dr. Gibson moved to defer the filling up of the blank. Some discussion arose on this point, when the resolution was left to read, "within the first days," &c.

The report of the committee on Medical Science was then called up, when a letter was read from Dr. Dowler, chairman of said committee, regretting his inability to be present, and the necessity of sending it.

Dr. Fenner then read the outlines of the report, and asked permission to retain the same for revision, copying, &c., which was granted.

Dr. Mauran offered the following resolution, which was adopted:

Resolved, That the committee on Publication be instructed to print conspicuously upon the title-page of the forthcoming volume of the transactions, the following declaration, viz: "The American Medical Association, although formally accepting and publishing the reports of the various standing committees, holds itself wholly irresponsible for the opinions, theories or criticisms, therein contained.

Dr. Storer moved the following resolution, which was adopted:

Resolved, That the hearty thanks of this Association be presented to their late Secretary, Alfred Stille, M. D., for his constant, unwearied and invaluable services since its first organization.

The report of the committee on Adulterated Drugs was read. A motion was made to refer the same to the committee on Publication, which was lost, and a motion to lay it on the table, adopted.

Dr. Gaillard, of S. C., chairman of the committee on Hygiene, presented an outline of the report on that subject. Referred to the committee of Publication, with authority to append thereto a paper now in preparation, on the Mortuary Statistics of certain cities.

Dr. Drake, of Ohio, offered the following amendments to the constitution, which were read, and ordered to lie over under the rule:

"All members by invitation, must be nominated in writing by five members of the Association, whose names shall be recorded in the minutes. When elected, they shall enjoy all the rights and privileges of delegates, and remain permanent members of the Association.

All permanent members shall be entitled to vote, and when they attend a meeting of the Association, their respective names shall be registered, and each shall pay the sum required from a delegate."

The Secretary read a protest from the Iowa University, against the representation of Rush Medical College in this Association.

Dr. Jervey moved to refer the protest to a special committee, to report at once.

Dr. Wood moved to refer it to the committee on Colleges of Pharmacy and Dentistry, which was carried; Dr. Jervey withdrawing his motion.

Dr. Wood read the following report of the committee of Nominations, which was adopted:

The committee to whom was referred the nomination of the chairmen of the several special committees, to report at the next session, and also of the committee for volunteer communications, report that they have fulfilled the object of their appointment, and offer the following list of chairmen, to the committees first referred to, viz:

1st. Dr. F. Condie, Philadelphia, chairman of the committee on the causes of the Tubercular Diathesis.

2d. Dr. S. H. Dickson, of Charleston, S. C., on the blending and conversion of the Types of Fever.

3d. Dr. James Jones, of New Orleans, on the mutual relations of Yellow and Bilious Remittent Fevers.

4th. Dr. John B. Johnson, of St. Louis, Mo., on Epidemic Erysipelas.

5th. Dr. Charles D. Meigs, of Philadelphia, Acute and Chronic diseases of the Neck of the Uterus.

6th. Dr. J. P. Jervey, of Charleston, S. C., on Dengue.

7th. Dr. Daniel Drake, of Cincinnati, on Milk Sickness — so called.

8th. Dr. Lopez, of Mobile, Alabama, Epidemic prevalence of Tetanus.

9th. Dr. Geo. B. Wood, of Philadelphia, on diseases of Parasitic Origin.

10th. Dr. R. D. Arnold, of Savannah, Ga., on the Physiological Peculiarities, and diseases of Negroes.

11th. Dr. Horatio Adams, of Waltham, Mass., on the Action of Water on lead pipes, and the diseases which proceed from it.

12th. Dr. Joseph Carson, of Philadelphia, on the Alkaloids which may be substituted for quinia.

13th. Dr. Geo. Hayward, Boston, Mass., on the Permanent Cure of Reducible Hernia.

14th. Dr. S. D. Gross, Louisville, Ky., on Results of Surgical Operations for the relief of Malignant Diseases.

15th. Dr. James R. Wood, N. Y., Statistics of the Operation for the Removal of Stone in the Bladder.

16th. Dr. Charles A. Pope, St. Louis, Missouri, Water, its topical uses in Surgery.

17th. Dr. Alex. A. Stevens, New York, Sanitary principles applicable to the Construction of Dwellings.

18th. Dr. Porcher, Charleston, S. C., Toxicological and Medicinal Properties of our Cryptogamic Plants.

19th. Dr. G. Emerson, Philadelphia, Agency of the Refrigeration produced through upward Radiation of Heat, as an exciting cause of disease.

20th. Dr. Worthington Hooker, Conn., on the Epidemics of New England and New York.

21st. Dr. John L. Atlee, of Lancaster, Pa., on the Epidemics of New Jersey, Pennsylvania, Delaware and Maryland.

22d. Dr. Robert W. Haxall, Richmond, Va., on the Epidemics of Virginia and North Carolina.

23d. Dr. Wm. M. Boling, Montgomery, Ala., on the Epidemics of South Carolina, Georgia, Florida and Alabama.

24th. Dr. Ed. H. Barton, Louisiana, on the Epidemics of Mississippi, Louisiana, Texas and Arkansas.

25th. Dr. Sutton, Georgetown, Ky., on the Epidemics of Tennessee and Kentucky.

26th. Dr. Thomas Reyburn, Missouri, on the Epidemics of Missouri, Illinois, Iowa and Wisconsin.

27th. Dr. Geo. Mendenhall, Ohio, on the Epidemics of Ohio, Indiana and Michigan.

The following gentlemen were appointed on the committee for Volunteer Communications, viz: Drs. Geo. Hayward, S. B. J. Jackson, D. H. Storer and Jacob Bigelow, of Boston, and Dr. Usher Parsons, of Providence, R. I.

Signed on behalf of the Committee,

GEO. B. WOOD, *Chairman.*

Charleston, Friday, May 9th, 1851.

The President read an invitation from the committee of Reception, to a steamboat Excursion.

Dr. M'Intyre, of New York, proposed that the code of Ethics and Constitution of the Association be recommended to published by the several State Societies. Proposition adopted.

Dr. Grimshaw offered the following resolution:

Resolved, That Medical Colleges, in publishing Statements of the number of Medical and Surgical cases treated at their Dispensaries, act contrary to the spirit of the Code of Ethics adopted by this body.

Adjourned.

Afternoon Session.

The Association re-assembled at 5 o'clock, Dr. B. R. Wellford, of Virginia, Vice President, in the chair.

The special order was called for, and Dr. Davis, of Ill., read a paper on the influence of certain diet on the functions of Respiration and Calorification, &c.

The President, Dr. James Moultrie, resumed the chair.

Dr. Hays moved to proceed with the consideration of unfinished business.

Dr. Grimshaw offered the subjoined resolution, which was adopted:

Resolved, That the thanks of the Association be returned to Dr. Davis for the paper just presented by him.

Dr. F. A. Ramsey, of Tenn., called up as unfinished business, the resolution offered yesterday by Dr. Jones, of Tenn., and not then acted upon, to which Dr. Grimshaw offered the following amendment: "And that the first Convention be held before the first of May, 1852." The question being taken on the resolution and the amendment, they were both negatived by a large majority.

Dr. Phelps, of New York, offered the following resolutions, which were unanimously adopted:

Resolved, That the warmest thanks of the Association be tendered to the Trustees of the St. Andrew's Society, for the gratuitous use of their very convenient and eligible Hall; and to all those other institutions and reading rooms, which have been so freely thrown open for the inspection and use of the members.

Resolved, That the committee of Arrangements receive our most grateful acknowledgments for the very handsome and indeed magni-

ficent manner in which they have provided for the entertainment and pleasure of the delegates from abroad, during their sojourn in the city of Charleston.

Resolved, That not only the profession of medicine, but also private munificence, and the kind attentions of the citizens generally, have conspired in manifestation of that urbanity of manner, and that unwearied and kind attention, which commands not only our profound admiration, but will be followed by the most pleasing recollections so long as life and thought shall endure.

On motion of Dr. Stevens, the above resolutions, with those offered by him at the morning session, were ordered to be published in the city papers.

Dr. Johnson, of St. Louis, moved to adjourn *sine die*, which was adopted.

The Vice President, Dr. Wellford, of Va., then congratulated the Association on the happy termination of its labors, and declared it adjourned to meet again in Richmond, Va., on the first Tuesday in May next.

PROCEEDINGS OF THE SIXTH ANNUAL MEETING OF MEDICAL SUPERINTENDENTS OF AMERICAN INSTITUTIONS FOR THE INSANE.—The Association of Medical Superintendents of American Institutions for the Insane, convened at the Hall of the American Philosophical Society of the city of Philadelphia, on the 19th day of May, 1851, at 10 o'clock, A. M.

The following gentlemen were present:—

Dr. ISAAC RAY, of Butler Hospital, for the Insane, Providence, Rhode Island.

Dr. N. CUTTER, of Pepperrill (private) Institution, Mass.

Dr. JOHN S. BUTLER, of the Connecticut Retreat for the Insane, Hartford.

Dr. N. D. BENEDICT, of the New York State Lunatic Asylum, Utica.

Dr. C. H. NICHOLS, of the Bloomingdale Asylum, near New York.

Dr. H. A. BUTTOLPH, of the New Jersey State Lunatic Asylum, Trenton.

Dr. T. S. KIRKBRIDE, of the Pennsylvania Hospital for the Insane, Philadelphia.

Dr. JOSHUA H. WORTHINGTON, of the Friend's Asylum for the Insane, Frankford, Pa.

Dr. WILLIAM S. HAINES, of the Philadelphia Lunatic Asylum, Blockley.

Dr. JOHN CURWEN, of the Pennsylvania State Lunatic Asylum, Harrisburg.

Dr. JOHN FONERDEN, of the Maryland Hospital, Baltimore.

Dr. S. HANBURY SMITH, of the Ohio Lunatic Asylum, Columbus.

Dr. J. W. PARKER, of the South Carolina Asylum, Columbia.

Dr. R. J. PATTERSON, of the Indiana Hospital for the Insane, Indianapolis.

Dr. J. M. Higgins, of the Illinois Hospital for the Insane, Jacksonville.

Dr. Pliny Earle, late of Bloomingdale Asylum, New York.

Dr. Smith, of the Missouri Hospital for the Insane, Fulton.

In the absence of the President and Vice President, the Association was called to order by the Secretary, Dr. Kirkbride, and on motion of Dr. Fonerden,

Dr. S. W. Parker, of South Carolina, was appointed Chairman, *pro tem.*

The minutes of the preceding meeting having been read, on motion of Dr. Fonerden, it was

Resolved, That a committee be appointed to select the names of individuals to fill any vacancies which may exist in the offices of the Association: Drs. Fonerden, Worthington and Hanbury Smith, were appointed the committee.

A letter from Dr. W. M. Awl, of Ohio, was read, in which he tendered the Association his resignation of the office of President, which was accepted, and referred to the committee to nominate officers.

On motion of Dr. Kirkbride, it was

Resolved, That the members of this Association, in receiving the resignation of Dr. Awl, as its presiding officer, cannot allow the occasion to pass, without testifying their full appreciation of his efforts, as one of the original promoters of this Association, and of his varied and important services in the cause of the Insane,—and their regrets are increased by the knowledge that impaired health should have compelled him to cease to occupy the post of active usefulness, in which he has been so long and so favorably known.

Resolved, That the Secretary be instructed to furnish Dr. Awl with a copy of these resolutions.

The committee to propose names to supply vacancies in the offices of the Association, nominated Dr. Luther V. Bell, of Massachusetts, as President, in the place of Dr. Awl, resigned, and Dr. Isaac Ray, of Rhode Island, as Vice President, in the place of Dr. Bell, nominated for President, which nominations were confirmed by the Association, and these gentlemen duly appointed.

On motion of Dr. Butler, it was

Resolved, That each member be authorized to invite such individuals, as he may think proper, to attend the meetings of this Association.

On motion of Dr. Kirkbride, it was

Resolved, That, as heretofore, a business committee consisting of three members be appointed, who shall report, each morning, what papers will be read, and what other business is likely to come before the Association during the day.

The Secretary read a letter, from the late President of the Association, announcing the subjects selected by him, on which the members are expected to report during the present meeting, in compliance with the resolution adopted last year.

Invitations from the Board of Directors and President of Girard College for Orphans, inviting the members of the Association to visit that institution, were read and accepted.

The resolution of the American Philosophical Society, tendering the use of their Hall for the meetings of the Association—also one, of the Board of Managers of the Pennsylvania Hospital, offering their library for the same purpose, were read.

Lawrence Lewis, Mordecai L. Dawson, and William Biddle, took seats with the Association, as Members of the Board of Managers of the Pennsylvania Hospital for the Insane, also William Bettle and John C. Allan, as Managers of the Friends' Asylum.

A paper prepared by Dr. Galt, of the Eastern Asylum of Virginia, on the impropriety of treating the insane, and persons affected with other disorders, in the same building, was read by Dr. Hanbury Smith, and after discussion, on motion of Dr. Butler, was laid on the table for future notice.

Dr. Cutter read a paper on the use of Stramonium, in the treatment of Insanity, which, after discussion, was laid upon the table.

Dr. Ray read a case illustrating the great ingenuity often exhibited by the insane in accounting for their delusions.

Dr. Worthington tendered to the Association an invitation to visit and examine the Friends' Asylum for the Insane—and Dr. Kirkbride, a similar one to visit the Pennsylvania Hospital for the Insane, which invitations were accepted and referred to the business committee.

Dr. Kirkbride made a report from the business committee, which was accepted.

On motion of Dr. Parker, adjourned to meet at the Girard College, at 4½ o'clock, this afternoon.

Afternoon Session.

The Association met at the Girard College, agreeably to adjournment, and under the guidance of the Directors and Officers of that magnificent monument of private charity, proceeded to visit its various parts, and to examine its internal arrangements, and then adjourned to meet at the Hall of the American Philosophical Society, at 9 o'clock to-morrow morning.

Second Day.—*Morning Session.*

The Association met agreeably to adjournment. The minutes of yesterday's sessions were read and adopted.

Dr. Edward Jarvis, of Dorchester, (private Institution) Mass., took his seat as a Member of the Association.

Dr. W. H. Stokes, of the Mount Hope Asylum, near Baltimore, appeared and took his seat as a member of the Association.

Dr. Charles Evans, Consulting Physician of the Friends' Asylum, also took a seat with the Association.

J. Konigmacher, as Trustee of the Pennsylvania State Lunatic Hospital, at Harrisburg, Alexander Cummings, W. S. Hansell, and T. Robinson, Esq'rs, as Guardians of the Philadelphia Lunatic Asylum, took seats with the Association.

The Secretary, on behalf of the Officers of the United States Mint, tendered an invitation to the Association to visit that institution;—

also a similar one from the Managers of the Pennsylvania Hospital—and from the Pennsylvania Institution for the Instruction of the Blind—from the Pennsylvania Institution for the Deaf and Dumb, and from the Philadelphia Athenæum, which were accepted and referred to the business committee.

Dr. Kirkbride, from the business committee, made a report.

Dr. Curwen read a paper, containing a manual for the use of attendants in Institutions for the Insane, which, after discussion, was laid upon the table.

On motion of Dr. Higgins, it was

Resolved, That a committee be appointed to examine the manual prepared by Dr. Curwen, and be requested to report during the present meeting of the Association.

Drs. Hanbury Smith, Fonerden and Benedict, were appointed the committee.

On motion of Dr. Hanbury Smith, it was

Resolved, That a committee be appointed to draw up a Constitution and Code of By-Laws for the government of the Association, and to aid in the despatch of business. Drs. Hanbury Smith, Kirkbride and Nichols, were appointed the committee.

A letter from Baines Sears, Esq., Secretary of the Massachusetts Board of Education, relative to the preventing of Insanity, by means of early education, was read and referred to a committee of three, of which Dr. Ray is Chairman, with power to select his associates.

Dr. Ray read a paper, entitled "Hints to Medical Witnesses in questions of Insanity," when, after discussion, on motion of Dr. Kirkbride, it was

Resolved, That the paper just read by Dr. Ray, is of so practical and valuable a character, that he be requested to publish it in the *American Journal of Insanity*, as containing the sentiments of this Association on the subject to which it refers.

Dr. Hanbury Smith, from the committee on publication, made a report, in which was recommended the publication of a volume of transactions, containing the history of the rise and progress of the Association, an abstract of its proceedings, and a selection from the papers read at its annual meetings. On motion of Dr. Kirkbride, the subject was referred back to the same committee to make a further report at a future session.

A communication was received from a committee of the Board of Guardians of the Philadelphia Alms House, inviting the Association to visit that institution, which was read, accepted, and referred to the business committee.

The paper prepared by Dr. Galt, and laid on the table yesterday, was called up for discussion, after which Dr. Patterson offered the following resolutions, viz:

Resolved, That it is the duty of the community to provide, and suitably care for all classes of the Insane, and that in order to secure their greatest good and highest welfare it is indispensable, that Institutions for their exclusive care and treatment, having a resident Medical Superintendent, should be provided, and that it is improper, except from extreme necessity and as a temporary arrangement, to con-

fine insane persons in County Poor Houses or other institutions, with those afflicted with, or treated for, other diseases, or confined for misdemeanors; which, on motion of Dr. Parker was laid on the table for future consideration.

Dr. Earle commenced reading an account of several Institutions for the Insane on the continent of Europe, visited by him two years since, and suspended the reading, on a motion to adjourn to meet at the Pennsylvania Hospital for the Insane, at 2 P. M., which was agreed to.

Afternoon Session.

The Association met agreeably to adjournment.

Dr. Chandler, of the Massachusetts State Lunatic Hospital, appeared and took his seat as a member of the Association.

Under the guidance of Dr. Kirkbride, the Association proceeded to visit and examine the Pennsylvania Hospital for the Insane, and then adjourned to meet at the Hall of the American Philosophical Society, at 9 o'clock to-morrow morning.

THIRD DAY.—*Morning Session.*

The Association met agreeably to adjournment.

The minutes of yesterday's proceedings were read and adopted.

Dr. Ranney, of Blackwell's Island Lunatic Asylum, took his seat as a member of the Association.

Dr. Earle, concluded the reading of his paper interrupted by the adjournment yesterday morning.

An invitation from Dr. Horner, to visit the University of Pennsylvania, and Wistar Museum, was read, accepted and referred to the business committee.

Dr. Kirkbride, from the standing committee on the construction of Hospitals for the Insane, in compliance with the resolution adopted last year, read a report, containing a "series of Resolutions or propositions, affirming the well ascertained opinions of this body in reference to the fundamental principles which should regulate the erection and internal arrangements of American Hospitals for the Insane."

I. Every Hospital for the Insane should be in the country, not within less than two miles of a large town, and easily accessible at all seasons.

II. No Hospital for the Insane, however limited its capacity, should have less than fifty acres of land, devoted to gardens and pleasure grounds for its patients. At least one hundred acres should be possessed by every State Hospital, or other Institution for 200 patients, to which number these propositions apply, unless otherwise mentioned.

III. Means should be provided to raise ten thousand gallons of water, daily, to reservoirs that will supply the highest parts of the building.

IV. No Hospital for the Insane should be built, without the plan having been first submitted to some Physician or Physicians, who

have had charge of a similar establishment, or are practically acquainted with all the details of their arrangements, and received his or their full approbation.

V. The highest number that can with propriety be treated in one building is two hundred and fifty, while two hundred is a preferable maximum.

VI. All such buildings should be constructed of stone or brick, have slate or metalic roofs, and as far as possible be made secure from accidents by fire.

VII. Every Hospital, having provision for two hundred or more patients, should have in it at least eight distinct wards for each sex—making sixteen classes in the entire establishment.

VIII. Each ward should have in it a parlor, a corridor, single lodgings for patients, an associated dormitory, communicating with a chamber for two attendants; a clothes room, a bath room, a water closet, a dining room, a dumb waiter and a speaking tube leading to the kitchen or other central part of the building.

IX. No apartments should ever be provided for the confinement of patients, or as their lodging rooms, that are not entirely above ground.

X. No class of rooms should ever be constructed without some kind of window in each, communicating directly with the external atmosphere.

XI. No chamber for the use of a single patient should ever be less than eight by ten feet, nor should the ceiling of any story occupied by patients be less than twelve feet in height.

XII. The floors of patients' apartments should always be of wood.

XIII. The stairways should always be of iron, stone, or other indestructible material, ample in size and number, and easy of ascent, to afford convenient egress in case of accident from fire.

XIV. A large Hospital should consist of a main central building with wings.

XV. The main central building should contain the offices, receiving rooms for company, and apartments entirely private, for the Superintending Physician and his family, in case that officer resides in the Hospital building.

XVI. The wings should be so arranged, that if rooms are placed on both sides of a corridor, the corridors should be furnished at both ends with movable glazed sashes for the free admission of both light and air.

XVII. The lighting should be by gas, on account of its convenience, cleanliness, safety and economy.

XVIII. The apartments for washing clothing, &c., should be detached from the Hospital building.

XIX. The drainage should be under ground, and all the inlets to the sewers should be properly secured to prevent offensive emanations.

XX. All Hospitals should be warmed by passing an abundance of pure fresh air from the external atmosphere, over pipes or plates, containing steam under low pressure, or hot water, the temperature

of which at the boiler does not exceed 212 degrees F., and placed in the basement or cellar of the building to be heated.

XXI. A complete system of forced ventilation, in connection with the heating, is indispensible to give purity to the air of a Hospital for the insane, and no expense that is required to effect this object thoroughly, can be deemed either misplaced or injudicious.

XXII. The boilers for generating steam for warming the building, should be in a detached structure, connected with which may be the engine for pumping water, driving the washing apparatus and other machinery.

XXII. All water closets should, as far as possible, be made of indestructible materials — be simple in their arrangement, and have a strong downward ventilation connected with them.

XXIV. The floors of bath rooms, water closets and basement stories, should as far as possible be made of materials that will not absorb moisture.

XXV. The wards for the most excited class should be constructed with rooms on but one side of a corridor, not less than ten feet wide, the external windows of which should be large, and having pleasant views from them.

XXVI. Wherever practicable, the pleasure grounds of a Hospital for the insane should be surrounded by a substantial wall so placed as not to be unpleasantly visible from the building.

Which propositions having been duly read and maturely considered, were adopted by the Association.

On motion of Dr. Hanbury Smith, it was

Resolved, That the Secretary be instructed to cause the propositions now adopted, in reference to the construction and arrangements of Hospitals for the insane, to be published in the medical journals of this continent, as the sentiments of this Association, on the subject referred to.

On motion of Dr. Smith, of Missouri, it was

Resolved, That a committee be appointed in reference to the best kinds of furniture for Hospitals for the insane, to report, if possible, during the present meeting of the Association.

Drs. Buttolph, Benedict and Curwen, were appointed the committee.

Dr. Fonerden offered the following resolution, viz:

Resolved, (1st,) That when a Hospital for 250 patients, has received 200, a new Hospital ought to be erected in anticipation of the time when the maximum number will be in possession of all the accommodations.

(2nd.) The second Hospital ought then to be constructed with a view to appropriate it to one sex of patients only, and as soon as it is ready for admission, there should be transferred to it from the first Hospital all the patients of that sex for which the new Hospital has been provided.

Dr. Benedict moved a division of the question, which was agreed to. The first section relative to the erection of a second Hospital, was adopted. The second section relative to appropriating the new

Hospital to a single sex, being under consideration, on motion of Dr. Kirkbride, it was

Resolved, That the whole subject be referred to a committee to report at the meeting next year.

Drs. Fonerden, Benedict and Chandler, were appointed the committee.

On motion of Dr. Patterson, the resolution offered by him yesterday, was taken up for consideration, and after discussion, was adopted.

On motion of Dr. Worthington, adjourned to meet at the Friends' Asylum for the Insane, at 3½ P. M.

Afternoon Session.

The Association met at the Friends' Asylum agreeably to adjournment, and having, under the guidance of Dr. Worthington, examined the different parts of that establishment, came to order for the transaction of business.

Dr. Chandler read a paper on the proper number of patients for one institution, and whether any advantages would result from a complete separation of the sexes in Hospitals devoted to their treatment, which, after discussion, was laid upon the table.

Dr. Morrin, of Quebec, read a paper on Typho-mania, which, after discussion, was laid upon the table.

FOURTH DAY.—*Morning Session.*

After having visited in a body the United States Mint and the Academy of Natural Sciences, the Association met agreeably to adjournment.

The minutes of yesterday's proceedings were read and adopted.

Dr. Nichols read a paper prepared by Dr. Williams, one of the consulting physicians of Blackwell's Island Hospital, N. Y., on Typho-mania, which, after discussion, was laid on the table.

Dr. Kirkbride read a paper on the Washing, Laundry, Bake House, &c., for Hospitals for the Insane, which, after discussion, was laid upon the table.

Dr. Jarvis read a paper on the supposed increase of Insanity, which, after discussion, was laid upon the table.

Dr. Kirkbride tendered his resignation of the office of Secretary, to take effect at the close of the present meeting, which was accepted.

On motion of Dr. Benedict, a committee was appointed to nominate a member to supply the vacancy occasioned by the resignation of Dr. Kirkbride.

Drs. Benedict, Hanbury Smith and Worthington, were appointed the committee.

Dr. Chandler commenced the reading of an obituary notice of the late Samuel B. Woodward, M. D., the first President of this Association, and prepared at the request of last meeting.

Dr. Hanbury Smith moved that a committee of Finance be appointed, which was agreed to.

Drs. Hanbury Smith, Kirkbride and Butler, were appointed.

The Finance committee made a report, which was accepted.

Adjourned to meet at the Philadelphia Hospital for the Insane, Blockley, at 4 P. M.

Afternoon Session.

After having visited the Pennsylvania Hospital in the city of Philadelphia, the first institution provided in America for the treatment of the insane, being founded just a century ago, the Association under the guidance of Dr. Haines, proceeded to inspect the different parts of the Philadelphia Lunatic Hospital and Alms House, Blockley.

On motion of Dr. Fonerden, it was

Resolved, That a committee of three be appointed to decide upon the place of the next meeting of the Association.

Drs. Kirkbridge, Parker and Patterson, were appointed the committee.

Dr. Hanbury Smith, from the committee relative to the manual for attendants, offered the following resolution, which was adopted, viz:

Resolved, That Dr. Curwen, when printing his manual, be requested to supply each member of the Association with an interleaved copy, and that these copies, with what remarks may be suggested during the year, be handed to the committee before making a final report next year.

Adjourned to meet at the Philosophical Hall, at 9 o'clock to-morrow morning.

FIFTH DAY.—*Morning Session.*

The Association met agreeably to adjournment.

On motion of Dr. Nichols, it was

Resolved, That a committee be appointed to express the thanks of this Association, to the various boards of managers and officers of the different institutions, visited by the Association, as well as to the various other bodies to whom we are indebted for invitations and other acts of kindness.

Drs. Nichols, Hanbury Smith, and Smith of Missouri, were appointed the committee.

On motion of Dr. Worthington, it was

Resolved, That the members of the Association be requested to report to the next meeting, all the fatal cases of that form of disease described by Dr. Bell, in his paper read before this Association in 1849, and other cases resembling it, together with the result of their autopsies, especial reference being had to the condition of the thoracic, abdominal and pelvic viscera, as well as to that of the brain.

Dr. Kirkbride, from the committee to select a place for the next meeting, reported that they had agreed to recommend that when the Association adjourns, it will adjourn to meet in the city of New York on the 3d Tuesday of May, 1852, at 10 o'clock, A. M., which recommendation was adopted.

On motion of Dr. Fonerden, it was

Resolved, That Dr. Ray be chairman of the committee in reference to Mr. Sears' letter, and that he nominate his associates. 2d. That the Secretary of this Association write to the Secretary of the Massachusetts Board of Education, informing him that his letter of June 22d, 1850, to Dr. Fonerden, was read at a meeting of the Association held 19th May, 1851, and then referred to a committee to report at the annual meeting in 1852.

Dr. Chandler finished the reading of his notice of the late Dr. Woodward, interrupted by the adjournment yesterday, when on motion of Dr. Kirkbride, it was

Resolved, That Dr. Chandler be requested to publish the memoir in the American Journal of Insanity.

Dr. Buttolph offered the following resolutions, which were unanimously adopted, viz:

Resolved, That this Association fully appreciates the benevolent motives, the self-sacrificing labors, and the untiring perseverance of Miss D. L. Dix, in her efforts to ameliorate the condition of the insane of our country, and that we deeply regret the failure during the last and previous session of Congress, of her application to that body for an appropriation of a portion of the public lands for the benefit of the indigent insane of the several States.

Resolved, That we do now, as we have heretofore done, most cordially recommend the passage of this act by Congress, believing as we do, that the measure would be alike creditable to the benevolent character of our government and people, and useful to the unfortunate recipients of the bounty.

Resolved, That Miss Dix be encouraged by our advice and sympathy to continue her application in behalf of this object, until her efforts are crowned with success, and that the Secretary be requested to furnish her with a copy of these resolutions.

The Treasurer, Dr. Kirkbride, reported: That since the last meeting he had received $18, and had paid expenses of the Association to the amount of $12.59, leaving in his hands a balance of $6.73.

On motion of Dr. Fonerden, it was

Resolved, That the President of the Association be requested to open the next meeting with a public address on the progress of knowledge concerning insanity.

Dr. Nichols, in compliance with the request of the last meeting of the Association, read an obituary notice of the late Amariah Brigham, M. D., one of its Vice Presidents, when on motion of Dr. Kirkbridge, it was

Resolved, That Dr. Nichols be requested to publish the same in the American Journal of Insanity.

Dr. Haines read a paper descriptive of the system of steam heating, connected with a forced ventilation at the Hospital buildings of the Philadelphia Alms House, which after discussion was laid upon the table.

On motion of Dr. Hanbury Smith, the committee on a Constitution and By-Laws was continued, to report at the next meeting.

On motion of Dr. Smith, of Missouri, it was

Resolved, That a committee of three be appointed to report at the next meeting of the Association, on the relative value of an upward and downward ventilation in Hospitals for the Insane.

Drs. Bell, Smith of Missouri, and Haines, were appointed the committee.

Dr. Ray made a statement in reference to an act passed by last Legislature of the State of Rhode Island, defining the legal relations of the insane of that Commonwealth.

Dr. Nichols, from the committee appointed for the purpose, reported the following resolutions, which after consideration, were unanimously adopted, viz :

Resolved, That the members of this Association have visited and inspected the Pennsylvania Hospital for the Insane, under the care of Dr. Kirkbride, as well as the parent institution in the city of Philadelphia, with great interest and satisfaction, recognizing in both abundant evidence of the well directed benevolence to which they owe their origin, and feeling convinced that, if not unequalled, they are, at least, unexcelled.

Resolved, That upon a close inspection of the Friends' Asylum for the Insane, near Frankford, under the care of Drs. Evans and Worthington, the Association has much pleasure in testifying to the excellent condition in which they found that well conducted and now venerable Institution.

Resolved, That the visit of the members of the Association to the Philadelphia Hospital and Lunatic Asylum in Blockley, under the medical care of Dr. Haines, has afforded them an opportunity of avowing their conviction that this establishment occupies a prominent position among the great charities which are the glory of Philadelphia. The cleanliness and comfort of its spacious apartments, the classification, order and freedom from restraint of its insane inmates, are commendable; and in all that relates to the supply of water, warmth, ventilation and drainage, this Institution is not only in advance of similar pauper establishments, but even of some of our State Hospitals.

Resolved, That while the Association finds so much to admire and commend in this Institution, and approvingly observes the astonishing improvements effected since its last meeting in this city six years ago, it feels free to remind the Board of Guardians, of its well known opinions on the importance of providing labor and spacious and constantly and readily accessible grounds for exercise for the insane, especially as the Institution possesses abundant means of accomplishing such advisable improvements in the extensive grounds and beautiful gardens connected with it.

Resolved, That our thanks are especially due to the Boards of Managers and Guardians of all the Institutions above mentioned for their personal attentions and the kindness shown us on the occasion of the visit of inspection to which reference has just been made, as well as for other proffered privileges, of which want of time has prevented our availing ourselves.

Resolved, That our thanks are due, and are hereby tendered, to the President and Directors of the Girard College for Orphans, for the liberal manner in which the Association was entertained during its visit to every part of that magnificent and admirably conducted Institution.

Resolved, That the Association returns its warmest thanks to Dr. R. M. Patterson, Director, and Franklin Peale, Esq., Chief Coiner of the United States mint, for the highly appreciated privilege afforded us of inspecting every part of this establishment, justly renowned for the elegance and perfection of its machinery and arrangements, and for the admirable manner in which it is conducted.

Resolved, That the Association gratefully acknowledges the liberality and kindness which prompted the American Philosophical Society to tender its Hall for the meetings of the Association, and the use of which places us under special obligations to that body.

Resolved, That the thanks of the Association are also due to the Managers of the Pennsylvania Hospital, for the offer of their beautiful Library Room for the meetings of the Association; to the officers of the Academy of Natural Sciences, for the privilege of making a very gratifying visit to that valuable Institution; to the officers of the Pennsylvania Institution for the Instruction of the Blind, of the Pennsylvania Institution for the Deaf and Dumb, of the Philadelphia Athenæum, and of the University of Pennsylvania, for the courteous invitations to visit those Institutions, which want of time alone prevented our accepting.

Resolved, That the Secretary be requested to furnish the daily papers of Philadelphia with a copy of these resolutions for publication.

The committee appointed to select a Secretary in the place of Dr. Kirkbridge, resigned, nominated Dr. Buttolph, who was appointed.

On motion of Dr. Hanbury Smith, it was

Resolved, That while the Association reluctantly accepts the resignation of its Secretary, Dr. Thomas S. Kirkbride, it feels that it is due not only to him, but to itself, to express its full appreciation of the faithful, devoted, and acceptable manner in which he has discharged the duties, often arduous and irksome, of the office, which he has filled from the first organization of the Association, and for which we return him our heart-felt thanks.

Dr. Hanbury Smith, from the committee on Publication, asked that said committee be continued, which was agreed to.

On motion of Dr. Parker, it was

Resolved, That the thanks of the Association are cordially tendered to its Vice President, Dr. I. Ray, for the able, impartial and courteous manner in which he has performed the duties of presiding officer during the present meeting.

On motion of Dr. Benedict, it was

Resolved, That the President of the Association be requested (within two months of the adjournment of the present meeting) to assign to each member a subject on which he shall make a written report at the next meeting.

On motion of Dr. Nichols, it was

Resolved, That the Secretary be requested to furnish a copy of the proceedings of the Association, to the editor of the American Journal of Insanity, and to the editors of the various medical journals in the United States and Canada, for publication in their respective journals.

After some remarks by the Vice President, Dr. Ray, on motion of Dr. Butler,

The Association adjourned to meet in the city of New York on the third Tuesday in May, 1852, at 10 o'clock, A. M.

THOMAS S. KIRKBRIDE, *Sec'y.*

OHIO STATE MEDICAL CONVENTION. — This body met in the Senate Chamber at Columbus, on Tuesday, the 3d of June, 1851, at 3½ o'clock, P. M., and was called to order by the President, Dr. Rickey, of Toledo.

After prayer by Dr. Landon, a committeee of five was appointed to report on membership, and another committee consisting of the same number to nominate officers.

During the absence of the committees, Prof. Mussey, by request of the meeting, gave a highly interesting and detailed account of the meeting of the American Medical Association, at Charleston, S. C.

The committee on nominations then reported the names of the following officers, the nominations being confirmed by a unanimous vote :

President — Dr. Wm. Judkins, of Cincinnati.
1st *Vice President* — Dr. G. A. B. Hempstead, of Scioto.
2nd " " Dr. H. L. Thrall, of Columbus.
3d " " Dr. Wm. H. Tiffe, of Urbana.
4th " " Dr. H. L. Cheney, of Groveport.
5th " " Dr. Steele, of Dayton.
Secretaries — Dr. S. B. Davis, of Franklin, and Dr. J. W. Tullis, of Troy.
Treasurer — Dr. G. W. Landon, of Westerville, Franklin Co.

On motion of Dr. Bœrstler, members of the profession from other States were invited to take seats in the Convention.

Dr. J. B. Thomson, Treasurer for the past year, submitted his report, which was accepted and adopted.

Dr. Murphy, of Cincinnati, then moved that when the Convention adjourns, it adjourn *sine die*. Dr. M. supported his resolution at some length, with a view to demonstrate that it was useless to keep up the Convention, now that the State Medical Society was organized, and in full blast; that one or other was superfluous, and that the forces which would keep either one in vigorous existence, would not suffice for two, &c.; and as the Society was incorporated, more thoroughly organized, and every way more likely to be permanent, he was in favor of now merging the Convention in the Society.

Dr. Kreider opposed the motion, and spoke in defence of the Medical Convention. He concluded by moving to lay the motion on the table, and that a committee of three be appointed to confer with a committee of the Medical Society on this subject.

Dr. Murphy defended his motion and hoped there would be no compromise.

Dr. Bœrstler spoke in favor of the committee.

Dr. R. Thompson entered into a history of the Medical Convention and its progress onward. He had favored the formation of the Medical Society as a more perfect organization. He was in favor of the committee for consultation.

Dr. Buckner opposed the committee, and was in favor of the original motion of Dr. Murphy. He thought it evident that the two organizations interfered with each other, and prevented the successful operation of each. He spoke at some length.

Dr. Carter was very sorry that so much time was wasted in this discussion. He thought the Society the better organization, and hoped the Convention would be dispensed with.

Dr. Grant opposed the motion. He hoped the Convention would not thus commit suicide. If the Society wished to strangle the Convention, let them attempt it, but do not let it come from us.

Dr. Kreider spoke again in favor of the committee.

Dr. McLean moved the previous question, which was put and carried.

The question was then taken on the original motion of Dr. Murphy and carried — 41 to 3. So the motion that when the Convention adjodrns it adjourn *sine die*, was carried.

Dr. Kreider moved that the Treasurer of the Convention be instructed to pay over any funds now in his hands to the Treasurer of the State Medical Society — Carried.

Dr. Grant moved that the interests of this Convention be merged in the Medical Society, and that the members be requested to join the same.

Dr. Mussey moved that the address of the late President of the Convention be delivered before the Medical Society to-morrow morning.

Dr. Bœrstler, as President of the Society, assured the Convention that it would give them pleasure to accede to the request.

The motion was then put, and carried.

Dr. J. B. Thompson moved that the Medical Society be requested to publish the proceedings of this meeting of the Convention in their proceedings. Carried.

Ohio State Medical Society.—The Society met in the Senate Chamber at Columbus, on Tuesday, the 4th of June, at 10 o'clock, A. M.

In the absence of the President, Professor Howard, Dr. Robert Thompson was called to the chair.

The minutes of the last year's meeting were read and approved.

On motion of Dr. Rickey, a committee of five were appointed to nominate officers for the ensuing year. Drs. Rickey, Gaston, Hubbard, Kreider and Murphy, were appointed said committee; who, after retiring, nominated the following persons:

President—Dr. J. L. Vattier, of Cincinnati.
1st *Vice President*—M. Z. Kreider, Fairfield county.
2d " " Prof. Kirtland, Logan county.
3d " " Ephraim Gaston, Belmont county.
4th " " Robert Rogers, Clark county.
Treasurer and Librarian—Dr. J. B. Thomson, Franklin county.
Secretaries—Dr. Wm. Trevitt, Franklin county, and Dr. M. Effinger, Fairfield county.
Committee on Admissions—Drs. Bœrstler, Mack, Loudon, R. Thompson, Carney.

On motion of Dr. S. M. Smith, members of the profession from other States were invited to a seat in the Society.

Before balloting for the officers nominated by the committee,

Dr. Langdon nominated Dr. Bœrstler for President. Dr. L. said he had no objection to Dr. Vattier, but he was connected with a medical college, and was not present. We had honored all the medical colleges of Ohio in our appointments, and now he thought we should select from the profession at large.

Dr. Rickey said he had no objection to Dr. Bœrstler, but Dr. Vattier would be here, was not connected with a medical college, and no objections could be urged against him.

Dr. Murphy said we did not come here to honor medical colleges or schools. We come here to see the profession, to get acquainted with each other, and have nothing to do with schools, as such.

Dr. R. Thompson said he agreed with Dr. Murphy. We did not come here to honor the professors, but he would say of them as the nigger said of the militia officer, they were as good as any body when they behaved themselves, and as worthy of office.

Dr. Gaston (one of the committee) said he should vote for Dr. Bœrstler, who was always present, and whom he knew. Dr. Vattier he did not know, and had never seen him at the meetings of the Society.

The ballots were then collected, and resulted—Bœrstler, 17; Vattier, 8. So Dr. Bœrstler was chosen President.

Dr. Kreider wished not to be chosen as Vice President.

The ballots for Vice President were then collected, and the result was that Drs. Kirtland, Rogers, Gaston and Vattier were declared duly elected.

The Secretaries and Treasurer nominated by the committee were then chosen.

Drs. R. Thompson, Mack, Langdon, Hubbard and Carney were elected a committee on Admissions.

The Society then adjourned, to meet to-morrow morning at 9 o'clock.

WEDNESDAY, June 5th.

The Society met, pursuant to adjournment, at 9 o'clock this morning, in the Senate Chamber, and was called to order by Dr. Bœrstler, the President. The minutes of the previous meeting were, after some slight amendments, adopted.

Dr. R. Thompson presented the Constitution, By-Laws, &c., of the Belmont county Medical Society, and also of the Montgomery county Medical Society; which were referred to the committee on Medical Societies.

The President announced the following standing committees:

Executive Committee—Drs. Wm. Trevitt, G. W. Maris, C. E. Denig, R. Hills, G. E. Eels.

Finance Committee—M. Z. Kreider, J. Morrison, N. Gay, E. Minor, S. B. Davis.

Publication Committee—R. Thompson, F. Carter, W. W. Rickey, Wm. Judkins, E. Carney.

On Ethics—G. W. H. Landon, J. P. Kirtland, R. Rogers, C. Robertson, G. V. Dorsey.

On Medical Societies—P. J. Buckner, E. Gaston, B. Whitney, Wm. Waddle, R. G. McLean.

The President presented the proceedings of the Ohio Medical Convention, stating that that body had voted to dissolve, and merge itself into the State Medical Society. The proceedings were read and accepted by the Society.

The President of the Convention, Dr. Rickey, was then invited to address the Society.

Dr. Rickey accordingly delivered an address on the Progress of Medicine, Surgery and Anatomy. This was a most able and labored address, giving the entire history of the rise and progress of Medical Science and Practice from its first commencement in the early ages of Egypt, through its slow stages of improvement in the bright days of Greece and Rome, its stand-still in the dark ages, and its rapid and glorious progress after the Reformation and the discovery of the art of Printing, to its present high standing among the Sciences and Professions of the present day.

The address was referred to the committee on Publication, with instructions to print it with the proceedings.

The committee on Admissions made a report of 28 names which had applied for admission.

Dr. Murphy objected to the report, and moved to strike from it the name of J. F. Potter, of Cincinnati, as being inadmissible by the rules of the Society.

It was moved that the name of Dr. Potter be referred to a select committee.

Dr. Murphy opposed the motion.

Dr. Kirtland withdrew his name from the recommendation of Dr. Potter as a candidate for admission. (This took the name of Dr. Potter from the list.)

Considerable discussion was here had as to the duty of the committee on Admissions on examining the rights of applicants, after which the report of the committee was adopted.

Dr. Thompson, from the committee on Ethics, made a verbal report, recommending the adoption of the code of Ethics published by the American Medical Society, two years since; which, on motion, was adopted.

Reports were made by the the Finance, Executive and Publication committees, and adopted.

Dr. Landon, committee on "the relation of mind and body with reference to disease," not being prepared to report, on motion, was continued, with instructions to report at the next meeting of the Society.

Dr. Buckner, from the committee on Medical Societies, reported the application of several County Medical Societies for admission, with resolutions, recommending the formation of societies in counties destitute of them, as the best means of preventing the spread of quackery. Report accepted, and resolutions adopted.

A motion was made that the Society meet this evening, to hear an eulogy on the character of Dr. Harrison.

Drs. Edwards and Murphy objected to hearing any eulogy till the regular reports and business of the Society was disposed of.

The question on the motion was then taken, and lost.

Prof. Mussey, as chairman of the committee appointed to make a report upon the subject of Cholera, had further time to report.

The same gentleman being called upon to report upon the subject of surgery in Ohio, reported that he had prepared an outline of the history and progress of Surgery in general during the last fifty years, but was unprepared to report upon the subject of Surgery in Ohio.

Dr. Buckner, chairman of the committee on Medical Societies, being called upon, announced that he was prepared, but that as his report was somewhat lengthy, he would ask leave to postpone its reading until the afternoon session, which was granted.

The President stated that as it had been customary for the President of the Society to deliver an introductory—although he would not attempt to deliver an address of that character—he would beg leave to read to the Society in the absence of a report on the subject by Dr. Mussey, a paper he had prepared upon the subject of Cholera. The reading of the paper being called for, the President, Dr. Bœrstler, read an elaborate history of the rise and progress of Cholera. He advocated the contagion theory of Cholera, and compared its progress, history and course with that of the plague, to support the idea. He traced its course also in this country, to show that it had never reached a country without being carried, and that it had followed, in its general course, the laws of contagious diseases. He also cited individual instances to show its contagious character, particularly in the neighborhood of Lancaster.

The address was laid on the table, and ordered to be printed.

After the reading of this paper by the President, Dr. M. B. Wright arose and said, that he presumed it was too late to enter into a discussion of the merits of the paper, but merely rose to ask for information. He stated that he had, as had been announced, prepared an eulogy upon the late lamented Prof. Harrison, to be delivered before the State Medical Convention, but that he had just learned that the subject of the eulogy was not a member of the State Medical

Society—that this eulogy contained many suggestions in relation to the matter just treated upon, and he wished to know whether it would be in order to read a paper of this character before the Convention.

The Chair decided that it would be perfectly in order after the reports of the standing committees, and the completion of the regular business of the Convention.

On motion, the Convention took a recess till two o'clock P. M.

JUNE 4th—2 o'clock, P. M.

The President presented invitations from the physician of the Penitentiary, and from the Superintendent of the Lunatic Asylum, inviting the members of the Society to visit those Institutions; which were accepted.

Dr. Buckner, then, according to previous appointment, read a paper on Ovarian diseases, in which the mode of treatment and result, in a large number of cases were given, and a mass of facts in reference to this class of diseases, was spread before the Society. Referred to Publication committee, with instructions to print entire.

Dr. S. M. Smith, on behalf of Dr. Bigelow, special committee to report on Medical Botany, asked further time to report.

Dr. S. M. Smith, being unprepared to report on Insanity, was continued for another year.

On motion, Dr. Mendenhall, of Cincinnati, was appointed to prepare a report on Medical Literature.

Dr. Hills, chairman of the Obituary committee, made a report, which on motion of Dr. Buckner, was referred back, with instructions to the committee to complete the same, and furnish it to the committee on Publication, for publication in the Transactions.

On motion, the committee was continued without change for the ensuing year.

Dr. C. W. Wright, of Cincinnati, read a report on the "Absorption of Gases and Vapors," which was, on motion, referred to the Publication committee.

A paper, by Dr. Albers, of Lancaster, on "Disinfecting Agents," was, in the absence of the author, read by the Secretary. On motion, it was accepted and referred.

Dr. Dawson read a paper entitled, "Observations on Typhoid Fever," which was laid on the table.

A motion to take up the resolution to repeal the first section of the By-Laws, locating the annual sessions of the Society in Columbus, was lost.

The Society then took a recess till 8 o'clock this evening.

WEDNESDAY, June 4—8 P. M.

Prof. Kirtland read a report on Hygiene. This report contained an interesting account of the impurities of water in wells and springs, the causes of such impurities, and their effect on health. Adopted, and ordered to be printed.

The same committee was continued, to report at the next meeting of the Society.

Prof. Wright then read his paper on "The Professional Charac-

ter and Opinions of the late Prof. Harrison, with Critical Remarks," which gave rise to an animated discussion, in which Drs. Carter, Wright, Murphy, and others, took an active part.

Dr. Edwards moved to take up the resolution offered last year, to repeal the section of the By-Laws fixing the place of holding the annual session at Columbus. Carried.

Dr. Baker advocated the adoption of the resolution. If the Society met around in different cities of the State, more physicians would connect themselves with the Society, from the fact that it met in their neighborhood, and the Society would be more prosperous.

Dr. R. Thomson opposed the resolution. If the Society became itinerant, the physicians in the place of the meeting might attend, but they would not attend the next year, as the Society would then be in a distant part of the State, so that the committees would not report, and the proceedings would be very meager.

After further discussion, the question was taken on the adoption of the resolution, and lost—it requiring a three-fourths vote.

The Society then adjourned till 9 o'clock to-morrow morning.

THURSDAY, June 5—9 o'clock, A. M.

Prof. Kirtland read a paper on the use of opium in certain forms of nervous irritability and coma, which frequently attend Typhus Fever, recommending the use of that drug as the only sure remedy in those forms of disease. Received and laid on the table.

Dr. R. Thompson read a paper on the use of Chloroform, in which he highly recommended its use in all surgical operations, and in almost all kinds of human suffering, in connection with other means. Received and referred to the committee on Publication.

Dr. T. W. Gordon read a paper on the use of the fruit of the Esculus Hippocastinum (Buckeye) as a remedy for Hæmorrhoidal Tumors. Received and referred, &c.

Dr. Carter read a paper on Reproduction. Received, &c.

Dr. Landon, Treasurer, made a report, which was accepted, and referred to the committee on Finance.

Dr. Trevitt, from the committee appointed last year to report on the propriety of appointing a Board of Medical Officers, whose duty it shall be to examine and report upon all candidates for the Degree of Medicine, in this State, made a report recommending the establishment of such a Board, and that the necessary legislation be sought to carry the measure into effect.

Dr. Bœrstler, from the same committee, made a minority report against the establishment of such a Board.

A motion was made to refer the two reports to a select committee of five, to report next year.

A discussion on the general merits followed, in which several participated, and in which the best means of elevating the profession were fully discussed. The question was recommitted to the old committee, with instructions to require higher preliminary education.

On motion of Dr. Hills, the name of W. C. Leach, a Homœopathist, was stricken from the records of the Society, and his diploma torn up by the President.

The reports of standing and special committees, and the read-

ing of papers, having been gone through with, the appointment o special committees on various subjects was suggested by the President.

The committee on Admissions reported a number of names, which were accepted.

The Society took a recess until three o'clock—the members visiting the Lunatic Asylum at half-past one.

Afternoon Session.

Society met, Prof. Kirtland in the chair.

The following special committees were announced to report at the next annual meeting of the Society:

Surgery—Dr. R. Thompson, Columbus; M. Z. Kreider, Lancaster, J. F. Holston.

Practical Medicine—W. W. Rickey, Toledo; A. H. Baker, Cincinnati; Wm. Waddle, Chillicothe.

Obstetrics—Wm. Judkins, Cincinnati; R. Hills, Delaware; G. W. Maris, Columbus.

Medical Literature—J. P. Hempstead, Portsmouth; J. Murphy, Cincinnati; S. Hanbury Smith, Columbus.

On motion of Prof. Edwards, Drs. Edwards, Kirtland and Kreider, were appointed a committee to enquire into the practicability of introducing a substitute for quinine.

On motion of Dr. Grant, the committee on Publication were instructed to incorporate the Code of Ethics of the American Medical Association in the published proceedings of this Society.

Dr. Buckner offered the following resolutions:

Resolved, That the committee to whom was recommitted the report providing for the appointment of a Board of Examiners or Censors, be and they are hereby instructed to make it the duty, and obligatory upon every member of this Society to require of all applicants to study medicine with them, a certificate of qualification for the study of medicine to be signed by this Board of Examiners before receiving them into their office as students.

Resolved, That it shall the duty of said Board of Examiners to satisfy themselves that the applicant promises sufficient energy of mind and character—is of good moral habits, and that he has received a good English education, including an intimate knowledge of the construction of language, a correct orthography, an acquaintance with the elements of Natural Philosophy, embracing the elementary principles of Mechanics, Optics, Acoustics, Pneumatics, and Hydraulics, and the Elementary Mathematical Sciences.

These resolutions were discussed at length by Drs. Buckner, Thompson, Kirtland, Trevitt, Smith, Carter, and others, and were then referred to a select committee consisting of Drs. Buckner, R. Thompson and Robertson.

On motion of Dr. W. W. Rickey,

Resolved, That the conduct of Secretary Corwin in restoring Dr. Bailey to the post of Examiner of Drugs in the New York Custom House, in accordance with the request of the Ohio Medical Convention, meets our decided approval, and the Secretary of this Society is hereby requested to publish this resolution, and forward a copy of the same to Mr. Corwin and Dr. Bailey.

Finance committee made their report, which was accepted.

On motion of Dr. Rickey, the resolution of Dr. Garst, amending the first article of the By-Laws, providing for the annual meetings of the Society at Columbus, was taken up and passed.

In accordance with this amendment, on motion, it was resolved that when the Society adjourns, it adjourn to meet at Cleveland on the first Tuesday in June, 1852.

On motion of Dr. Robertson, the thanks of the Society were tendered to Hon. E. Hayward, State Librarian, for the use of the Senate Chamber, for its meetings.

On motion of Dr. McLean, the thanks of the Society were tendered to the resident members for conveying that body to the Ohio Lunatic Asylum.

On motion of Dr. Buckner, the publication committee was instructed to procure a copy of the paper read by Prof. Carter at this meeting, for publication among the proceedings.

The following gentlemen were elected delegates to the National Medical Convention, to be held at Richmond, Va., next year: Drs. Charles Robertson, McConnelsville; P. J. Buckner, Cincinnati; J. P. Coulter, Wooster; R. Thompson, Columbus; T. W. Gordon, Georgetown; J. Morrison, Columbus; Robt. Rodgers, Springfield; H. L. Thrall, Columbus; R. G. McLean, Canal Winchester; E. Gaston, Morristown; Prof. H. A. Ackley, Cleveland; Dr. T. H. Baker, Wayne county.

On motion of Dr. Dawson, the Secretaries were added to the committee on Publication.

On motion of Prof. S. M. Smith, a committee of three, consisting of Drs. S. M. Smith, Mussey and Bœrstler, was appointed to examine into the condition of the Ohio Lunatic Asylum, as compared with similar institutions in this country and Europe, with instructions to memoralize the Legislature as to any improvements which such examination may suggest.

On motion, all papers laid on the table were taken up and referred to the committee on Publication.

On motion of Prof. Carter, it was resolved that all members leaving the State, shall be entitled to certificates of honorary membership.

On motion of Dr. Trevitt, all delegates who are unable to attend the meeting of the National Medical Association, were requested to notify the President of the Society as early as possible, that the vacancies so caused may be filled.

On motion of Prof. Carter, the Secretary was instructed to notify all members who have not paid their initiation fee, that their names will be stricken from the rolls, if payment is not made within two months.

On motion of Dr. Gordon, the committee on Publication was instructed to incorporate in the published proceedings of the present meeting, all papers ordered to be published at the last meeting, which have not yet been printed.

On motion of Dr. Dawson, the thanks of the meeting were tendered to the officers of the Society for the able manner in which they have discharged their duties.

On motion, the Society adjourned to meet at Cleveland on the first Tuesday of June next.